



OUTPATIENT PHARMACY

TECHNICIAN'S USER MANUAL

Version 7.0
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Department of Veterans Affairs
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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
12/08	37a-37f	PSO*7*303	Added text for Tricare functionality. (M. Anthony, PM; G. O’Connor, S. B. Scudder, Tech Writers)
08/08	4, 41, 47, 50, 53, 54	PSO*7*225	The following changes are included in this patch. <ul style="list-style-type: none"> • The Environmental Indicator, “Environmental Contaminant,” has been replaced with “Southwest Asia Conditions” or “SW Asia Conditions.” • “Was treatment related to PROJ 112/SHAD?” has been added. • The Service Connected question has been updated. • Original provider comments no longer being carried over to renewal orders has been noted. (S. Templeton, PM; S. B. Scudder, Tech Writer)
10/07	27, 36-38	PSO*7*260	Included updates for the ePharmacy Phase 4 project. For more information, see the <i>ePharmacy/ECME Enhancements Release Notes</i> . (S. Spence, S. Krakosky, Tech Writer)
10/07	All	PSO*7*264	Re-numbered pages; removed headers and section breaks. Incorporated changes for FY07Q4 release; for specific updates, see the Release Notes. (E. Williamson, PM; S. Krakosky, Tech Writer)

(This page included for two-sided copying.)

Preface

This user manual describes the functional characteristics of Outpatient Pharmacy V. 7.0. It is intended for pharmacists and technicians who are familiar with the functioning of Outpatient Pharmacy in a VA Medical Center.

(This page included for two-sided copying.)

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Chapter 1: Introduction

The Outpatient Pharmacy (OP) software provides a way to manage the medication regimen of veterans seen in the outpatient clinics and to monitor and manage the workload and costs in the Outpatient Pharmacy. The Pharmacy Ordering Enhancements (POE) project (patch PSO*7*46 for Outpatient Pharmacy) improves the flow of orders between Inpatient and Outpatient Pharmacy as well as between Computerized Patient Record System (CPRS) and backdoor pharmacy.

The primary benefits to the veteran are the assurance that he or she is receiving the proper medication and the convenience of obtaining refills easily. The clinicians and pharmacists responsible for patient care benefit from a complete, accurate, and current medication profile available at any time to permit professional evaluation of treatment plans. Utilization, cost, and workload reports provide management cost controlling tools while maintaining the highest level of patient care.

Documentation Conventions

This *Outpatient Pharmacy V. 7.0 Technician's User Manual* includes documentation conventions, also known as notations, which are used consistently throughout this manual. Each convention is outlined below.

Convention	Example
Menu option text is italicized.	There are eight options on the <i>Archiving</i> menu.
Screen prompts are denoted with quotation marks around them.	The "Dosage:" prompt displays next.
Responses in bold face indicate user input.	Select Orders by number: (1-6): 5
<Enter> indicates that the Enter key (or Return key on some keyboards) must be pressed. <Tab> indicates that the Tab key must be pressed.	Type Y for Yes or N for No and press <Enter>. Press <Tab> to move the cursor to the next field.
 Indicates especially important or helpful information.	 Up to four of the last LAB results can be displayed in the message.
 Indicates that options are locked with a particular security key. The user must hold the particular security key to be able to perform the menu option.	 This option requires the security key PSOLOCKCLOZ.

Getting Help

?, ??, ??? One, two or three question marks can be entered at any of the prompts for online help. One question mark elicits a brief statement of what information is appropriate for the prompt. Two question marks provide more help, plus the hidden actions, and three question marks will provide more detailed help, including a list of possible answers, if appropriate.

Related Manuals

The following manuals are located on the VistA Documentation Library (VDL) at:
<http://www.va.gov/vdl>.

Main Package Documentation:

- *Outpatient Pharmacy V. 7.0 Release Notes*
- *Outpatient Pharmacy V. 7.0 Manager's User Manual*
- *Outpatient Pharmacy V. 7.0 Pharmacist's User Manual*
- *Outpatient Pharmacy V. 7.0 Technician's User Manual*
- *Outpatient Pharmacy V. 7.0 User Manual – Supplemental*
- *Outpatient Pharmacy V. 7.0 Technical Manual/Security Guide*

Additional Documentation:

Additional documentation related to specific projects is also located on the VDL. For example, there may be several different Release Notes documents, which apply to specific projects. Also, there may be several sets of “Change Page” documents, which apply to changes made only for a specific package patch.

Chapter 2: List Manager

The screen displayed when processing an order has changed dramatically from the previous version of Outpatient Pharmacy (e.g., v. 6.0). The new screen was designed using List Manager.

This new screen gives more information and easier accessibility to vital reports and areas of a patient's chart.

Please take the time to read over the explanation of the screen and the actions that can now be executed at the touch of a key. This type of preparation before attempting to use List Manager will reduce the time and effort needed to become skilled in order processing with this new version of List Manager.

Outpatient List Manager

Allergy Indicator

The screenshot shows a terminal-style interface with the following sections:

- Screen Title:** Patient Information Feb 09, 2006 16:31:03 Page: 1 of 2
- Header Area:**
 - OPPATIENT17, ONE
 - PID: 000-12-3456 Ht (cm): 175.26 (08/06/2000)
 - DOB: AUG 30,1948 (57) Wt (kg): 108.18 (01/14/2006)
 - SEX: MALE
 - +
- List Area (Scrolling region):**
 - Eligibility: SERVICE CONNECTED 50% to 100% SC%: 70
 - RX PATIENT STATUS: SC LESS THAN 50%
 - Disabilities:
 - 1313 TWIN OAKS LANE
 - ANYVILLE HOME PHONE: 555-555-8361
 - ALABAMA 12345 CELL PHONE:
 - Prescription Mail Delivery: Regular Mail WORK PHONE:
- Message Window:** (This label encompasses the scrolling region content)
- Action Area:**
 - Allergies
 - Verified: PEANUTS,
 - + Enter ?? for more actions
 - EA Enter/Edit Allergy/ADR Data PU Patient Record Update
 - DD Detailed Allergy/ADR List EX Exit Patient List
 - Select Action: Quit//

Screen title: The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Medication Profile, New OP Order (ROUTINE), etc.).

Allergy indicator: This indicator displays when there has been information entered into the ALLERGY field for the patient. The indicator displays "NO ALLERGY ASSESSMENT" if there is no allergy assessment for the patient.

Header area: The header area is a "fixed" (non-scrollable) area that displays patient information.

List area: (scrolling region) This area scrolls (like the previous version) and displays the information on which action can be taken.

Message window: This section displays a plus (+) sign, minus (-) sign, or informational text (i.e., Enter ?? for more actions). If a plus sign is entered at the action prompt, List Manager will "jump" forward a page. If a minus sign is displayed and entered at the action prompt, List Manager will "jump" back a screen. The plus and minus signs are only valid actions if they are displayed in the message window.

Action area: A list of actions display in this area of the screen. If a double question mark (??) is entered at the "Select Item(s)" prompt, a "hidden" list of additional actions that are available will be displayed. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the action.

Example: Showing more Indicators and Definitions

Order Status and CMOP Indicators

Allergy Indicator

Medication Profile May 22, 2006 10:44:56 Page: 1 of 1
 OPPATIENT16,ONE
 PID: 000-24-6802 Ht (cm): 177.80 (02/08/2004)
 DOB: APR 3,1941 (65) Wt (kg): 90.45 (02/08/2004)
 SEX: MALE
 Non-VA Meds on File
 Last entry on 01/13/01

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP	
-----ACTIVE-----									
1	503902	ACETAMINOPHEN 500MG TAB	60	AT	05-22	05-22	3	30	
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP	60	A>	05-07	05-07	5	30	
3	503871\$	HISTOPLASMIN 1ML	1	A	03-14	03-14R	5	30	
4	100002042\$e	NALBUPHINE HCL INJ 10MG/ML	1	A	03-14	03-14	5	30	
5	100002040\$▲	SALICYLIC ACID 40% OINT (OZ)	1	S	03-14	03-17	5	30	
-----DISCONTINUED-----									
6	503881	BACLOFEN 10MG TABS	30	DC	04-07	05-01	2	30	
7	100002020A\$	TIMOLOL 0.25% OPTH SOL 10ML	1	DE	02-03	02-03	5	30	
-----HOLD-----									
8	100001942	ABDOMINAL PAD 7 1/2 X 8 STERILE	1	H	09-28	09-28	5	30	
-----NON-VERIFIED-----									
9	100002039\$	BACLOFEN 10MG TABS	30	N	03-14	03-14	5	30	
-----PENDING-----									
10	AMPICILLIN 250MG CAP		QTY: 40		ISDT: 05-29		REF: 0		
11	SIMETHICONE 40MG TAB		QTY: 30		ISDT: 05-30		REF: 3		
-----NON-VA MEDS (Not dispensed by VA)-----									
GINKO EXT 1 TAB ONCE A DAY BY MOUTH					Date Documented: 01/13/01				
IBUPROFEN 50MG TAB					Date Documented: 12/10/00				

Enter ?? for more actions
 PU Patient Record Update NO New Order
 PI Patient Information SO Select Order
 Select Action: Quit//

Indicators: Copay Indicator, ePharmacy Indicator, Pending Orders, Flagged Order, Non-VA Meds Orders, Return To Stock Indicator

All orders are sub-grouped by like statuses and then listed alphabetically within the sub-group.

Order Status: The current status of the order. These statuses include:

- A Active
- S Suspended
- N Non-Verified or Drug Interactions
- H Hold or Provider Hold
- E Expired
- DC Discontinued or Discontinued by Provider
- DE Discontinued (Edit)



A “B” will be appended to the above statuses if the Bad Address Indicator was set and there was no active temporary address at the time of the last label activity.

CMOP Indicators: There are two separate indicators when the drug in an order is marked for Consolidated Mail Outpatient Pharmacy (CMOP) processing. This indicator is displayed after the Order Status if applicable.

- > Drug for the prescription is marked for CMOP
- T Displayed when the last fill is either in a Transmitted or Retransmitted CMOP state. (This indicator can overwrite the “>” indicator.

Copay Indicator: A “\$” displayed to the right of the prescription number indicates the prescription is copay eligible.

ePharmacy Indicator An ‘e’ displayed to the right of the prescription number indicates that the prescription is electronic third-party billable.

Return to Stock Indicator: An “R” displayed to the right of the Last Fill Date indicates the last fill was returned to stock.

Pending Orders: Any orders entered through Computerized Patient Records System (CPRS), or another outside source, that have not been finished by Outpatient Pharmacy.

Non-VA Meds Orders: Any over the counter (OTC) medications, herbal supplements, medications prescribed by providers outside the VA, and medications prescribed by the VA, but purchased by the patient at an outside pharmacy are displayed here. Non-VA Meds orders cannot be placed or updated in Outpatient Pharmacy. The user can input information about a patient’s use of Non-VA Meds only through CPRS. However, the user can use either CPRS or Outpatient Pharmacy menu options to view Non-VA Meds data in a patient’s medical records.

Third Party Rejects Any prescriptions that are rejected by third-party payers because of Refill Too Soon (code 79) or Drug Utilization Review (DUR - code 88) are displayed in this section.

Example: Showing Rejected Prescriptions

Medication Profile		August 12, 2006@12:35:04		Page: 1 of 1			
OPPATIENT16,ONE				<A>			
PID: 000-24-6802		Ht(cm): 177.80		(02/08/2005)			
DOB: APR 3,1941 (65)		Wt(kg): 90.45		(02/08/2005)			
SEX: MALE							
#	RX #	DRUG	ISSUE QTY ST	LAST DATE	REF FILL	DAY REM	SUP
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----							
1	51368009\$e	DIGOXIN (LANOXIN) 0.05MG CAP	90 A>	02-16	02-16	3	90
2	51360563e	OXYBUTYNIN CHLORIDE 15MG SA TAB	180 S>	02-15	05-06	0	90
-----ACTIVE-----							
3	100003470e	ABSORBABLE GELATIN FILM	1 A	11-04	11-04	5	31
4	100003461	ACETAMINOPHEN 650MG SUPPOS.	10 A>	11-04	11-04	1	10
5	100003185e	ALBUMIN 25% 50ML	2 A	08-01	08-01	5	5
-----DISCONTINUED-----							
6	100003530	ANALGESIC BALM 1 POUND	1 A	01-08	01-08	3	90
7	100003400	APPLICATORS, COTTON TIP STERILE	10 A	09-23	09-23	5	31
+ Enter ?? for more actions							
PU Patient Record Update		NO New Order					
PI Patient Information		SO Select Order					
Select Action: Next Screen//							

Using List Manager with Outpatient Pharmacy

List Manager is a tool designed so that a list of items can be presented to the user for an action.

For Outpatient Pharmacy, the List Manager does the following:

- Allows the pharmacist or technician to browse through a list of actions
- Allows the pharmacist or technician to take action against those items
- Allows the user to select an action that displays an action or informational profile
- Allows the user to select a different action without leaving an option.



Not all functionality displayed in this section (i.e., hidden and speed actions) is available to pharmacy technicians.

Entering Actions

Actions are entered by typing the name(s), or synonym(s) at the “Select Item(s)” prompt. In addition to the various actions that may be available specific to a particular option, List Manager provides generic actions applicable to any List Manager screen. A double question mark (??) may be entered at the “Select Action” prompt for a list of all actions available. The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the action.

Action	Description
Next Screen [+]	Move to the next screen (may be shown as a default).
Previous Screen [-]	Move to the previous screen.
Up a Line [UP]	Move up one line.
Down a Line [DN]	Move down one line.
Shift View to Right [>]	Move the screen to the right if the screen width is more than 80 characters.
Shift View to Left [<]	Move the screen to the left if the screen width is more than 80 characters.
First Screen [FS]	Move to the first screen.
Last Screen [LS]	Move to the last screen.

Action	Description
Go to Page [GO]	Move to any selected page in the list.
Re Display Screen [RD]	Redisplay the current.
Print Screen [PS]	Prints the header and the portion of the list currently displayed.
Print List [PL]	Prints the list of entries currently displayed.
Search List [SL]	Finds selected text in list of entries.
Auto Display (On/Off) [ADPL]	Toggles the menu of actions to be displayed/not displayed automatically.
Quit [QU]	Exits the screen (may be shown as a default).

Outpatient Pharmacy Hidden Actions

The Outpatient Pharmacy hidden actions will display with the previous hidden actions once a completed or finished order is selected and a double question mark (??) is entered at the “Select Action” prompt.

The following hidden actions appear on the prescription profile screen and can only be applied to one order at a time.

Action	Description
Activity Logs [AL]	Displays the Activity Logs.
Copy [CO]	Allows the user to copy and edit an order.
DIN	Displays available drug restriction/guideline information for the Dispense Drug and Orderable Item associated with the selected medication order.
Hold [HD]	Places an order on a hold status.
Other OP Actions [OTH]	Allows the user to choose from the following sub-actions: Progress Note [PN], Action Profile [AP], Print Medication Instructions [MI], Display Orders' Statuses [DO], or Non-VA Meds Report [NV].

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.

Other Outpatient Pharmacy ListMan Actions

Action	Description
Exit [EX]	Exit processing pending orders.
AC	Accept.
BY	Bypass.
DC	Discontinue.
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 3: Using the Pharmacy Technician's Menu

The options shown in this chapter are intended for use by pharmacy technicians and other pharmacy personnel assigned the *PSO USER2* menu, who will view prescriptions and/or inquire into other Outpatient Pharmacy files.

Example: Accessing the *Pharmacy Technician's Menu*

```
Select OPTION NAME: PSO USER2           Pharmacy Technician's Menu
Outpatient Pharmacy software - Version 7.0
```

The following options are available on this menu:

- *Bingo Board User ...*
- *Change Label Printer*
- *DUE User ...*
- *Medication Profile*
- *Patient Prescription Processing*
- *Pull Early from Suspense*
- *Queue CMOP Prescription*
- *Release Medication*
- *Update Patient Record*

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Chapter 4: Using the Bingo Board User Menu

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

Bingo Board User

[PSO BINGO USER]

This menu enables use of the bingo board display. The options on this menu allow the user to display, enter, or remove a patient's name or a number 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 Computerized Patient Record System (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 be entered.

A "Ticket #" prompt appears 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:" has been added as fixed text to the display screen.

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: OPPATIENT3,ONE 02-23-74 000579013 NO NSC VETERAN

      OPPATIENT3,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: OPPROVIDER3,TWO
Entered By: OPCLERK2,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:
```

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Chapter 5: Changing the Label Printer

This chapter describes the *Change Label Printer* option.

Change Label Printer

[PSO CHANGE PRINTER]

This option allows the user to change the printer to which labels are printed.

```
Select Outpatient Pharmacy Manager Option: Change Label Printer
Select LABEL PRINTER: LABELPRT2// <Enter> LABELPRT2

OK to assume label alignment is correct? YES//<Enter>
```

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Chapter 6: Creating, Editing, and Printing a DUE Answer Sheet

This chapter describes the options on the *DUE User* menu.

DUE User

[PSOD DUE USER]

This menu provides the means to create an answer sheet entry in the DUE ANSWER SHEET file and edit an existing Answer Sheet. A blank form of a selected DUE questionnaire can also be printed in multiple copies to be distributed to providers to complete when ordering medications being evaluated.

- 1 *Enter a New Answer sheet*
- 2 *Edit an Existing Answer Sheet*
- 3 *Batch Print Questionnaires*

Enter a New Answer Sheet

[PSOD CREATE ANSWER SHEET]

In this option, answers to a DUE Questionnaire can be entered. This creates an answer sheet entry in the DUE ANSWER SHEET file. These answer sheets can be kept online for statistical and/or compliance studies. Answer sheets are stored in the file using a sequence number. This number is automatically generated by the computer and should be written on the hard copy of the answer sheet immediately so that it can be used later in editing or deleting the entry.

Edit an Existing Answer Sheet

[PSOD EDIT ANSWER SHEET]

Edit a DUE Answer Sheet entry using this option. Ordinarily, the sequence number is available when editing the Answer Sheet; however, the user can search the file if the provider, drug, or questionnaire is known by typing ^S at the "SEQUENCE NUMBER" prompt. The search displays all of the entries containing the combination of provider, drug, or questionnaire used in the search.

Batch Print Questionnaires

[PSOD BATCH PRINT QUESTIONNAIRE]

To print a blank form of a selected questionnaire, enter the number of copies and a printer device. These questionnaire answer sheets can be distributed to providers to complete when ordering medications being evaluated.

Chapter 7: Using the Medication Profile

This chapter describes the Medication Profile, its different formats, and how it can be used in patient care.

Medication Profile

[PSO P]

The Medication Profile displays a profile of all prescriptions on file for a particular patient. The prescription display includes all Non-VA Med orders also. The user may view this information directly on the screen or request it to be printed. The medication profile is available in two formats: short or long.

Medication Profile: Short Format

The short format displays the following information:

- patient name
- last four digits of the patient's SSN
- eligibility
- reactions
- prescription number
- Sig
- quantity
- last fill date
- address
- DOB
- narrative
- prescriptions
- drug name
- status
- issue date
- refills remaining.

The short report format of the fields for Non-VA Med orders include the drug name or orderable item name, dosage, schedule and date documented.

The short format displays the status in an abbreviated form. The following is an explanation of the codes:

Code	Status/Description
A	Active
B	Bad Address Indicated
DC	Discontinued
E	Expired
H	Hold
N	Non Verified
P	Pending due to drug interactions
S	Suspended
\$	Copay eligible
E	third-party electronically billable
R	Returned to stock prescription (next to last fill date)

Example: Medication Profile – Short Format

```
Select PATIENT NAME:  OPPATIENT,THREE      3-5-9      000006578      NO
NSC
VETERAN      OPPATIENT,THREE
WARNING : ** This patient has been flagged with a Bad Address Indicator.
LONG or SHORT: SHORT// SHORT
Sort by DATE, CLASS or MEDICATION: DATE// <Enter>

All Medications or Selection (A/S): All// <Enter>
DEVICE: HOME// [Select Print Device]  GENERIC INCOMING TELNET
```

```
OPPATIENT,THREE      ID#:      0279

321 PECAN STREET      DOB:      DEC 29,1968
TESTING 2
ANYTOWN      PHONE: 5554325455
TEXAS 12345      ELIG: SC LESS THAN 50%
SC%: 40

CANNOT USE SAFETY CAPS.

WEIGHT(Kg):      HEIGHT(cm):
DISABILITIES:

ALLERGIES:_____
ADVERSE REACTIONS:_____

Enter RETURN to continue or '^' to exit: <Enter>
```

```
Outpatient prescriptions are discontinued 72 hours after admission

Medication Profile Sorted by ISSUE DATE
REF
Rx#      Drug      ST REM  Issued  Last Fill
-----
300486      ACE BANDAGE 4 INCH      A  5 10-17-06 10-17-06
QTY: 1      SIG: USE LOOSELY ON AFFECTED AREA AS NEEDED
$100002342  AMOXICILLIN 250MG CAP      A  3 10-10-06 10-10-06
QTY: 15     SIG: TAKE ONE CAPSULE BY BY MOUTH QAM\QPM\Q4D&Q6D~Q12D
          TAKE ONE | EVERY | TWO ~ THREE & FOUR \ FIVE \TAB
$100002343  SIMETHICONE 40MG TAB      DC  3 10-10-06 10-10-06
QTY: 15     SIG: CHEW ONE TABLET BY BY MOUTH QAM\QPM!Q4D&Q6D~Q12D
          TAKE ONE|| EVERY | TWO ~~THREE ~ AND &&FOUR&HHHH
          \ \ FIVE \TAB
```

Medication Profile: Long Format

The long format displays all information contained on the short format as well as the following additional fields:

- physician's name
- fill date
- dates of refills/partial fills
- whether the prescription was filled at the pharmacy window or by mail
- clerk code
- total allowable refills
- which division filled it

The long report format of the fields for Non-VA Med orders include the start date, CPRS order #, status, documented by, order check(s), override reason, override provider, and statement of explanation.

Example: Medication Profile – Long Format

```
Select PATIENT NAME:   OPPATIENT,ONE      8-5-19      666000777      NO      NSC
VETERAN      OPPATIENT,ONE
WARNING : ** This patient has been flagged with a Bad Address Indicator.
LONG or SHORT: SHORT// LONG
Sort by DATE, CLASS or MEDICATION: DATE// <Enter>

All Medications or Selection (A/S): All// <Enter>
DEVICE: HOME// [Select Print Device] GENERIC INCOMING TELNET

OPPATIENT,ONE      ID#:      0777
      (TEMP ADDRESS from AUG 28,2006 till (no end date))
LINE1      DOB:      AUG 5,1919
ANYTOWN      PHONE: 555-1212
TEXAS 77379      ELIG:      NSC
CANNOT USE SAFETY CAPS.

WEIGHT(Kg):      HEIGHT(cm):
DISABILITIES:

ALLERGIES:_____
ADVERSE REACTIONS:_____

Enter RETURN to continue or '^' to exit: <Enter>

Outpatient prescriptions are discontinued 72 hours after admission
```

Medication Profile Sorted by ISSUE DATE

```
Rx #: 100001968Ae      Drug: LOPERAMIDE 2MG CAP
SIG: TAKE TWO CAPSULES BY MOUTH EVERY DAY
QTY: 60      # of Refills: 5      Issue/Expr: 12-15-05/06-16-06
Prov: OPPROVIDER16,TWO      Entry By: 10000000013 Filled: 01-14-06 (M)
Last Released:      Original Release:
Refilled: 02-19-04 (M)      Released:
Remarks:
Division: ALBANY (500)      Active      4 Refills Left
```

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

Example: Medication Profile – Long Format (continued)

Non-VA MEDS (Not Dispensed by VA)
GINKO BILLOBA TAB
Dosage: 1 TABLET
Schedule: ONCE A DAY
Route: MOUTH
Status: Discontinued (10/08/03)
Start Date: 09/03/03 CPRS Order #: 12232
Documented By: OPCLERK21,FOUR on 09/03/03
Statement of Explanation: Non-VA medication not recommended by VA provider.

ACETAMINPHEN 325MG CT
Dosage: 325MG
Schedule:
Route:
Status: Active
Start Date: 09/03/03 CPRS Order #: 12234
Documented By: OPCLERK21,FOUR on 09/03/03
Statement of Explanation: Non-VA medication recommended by VA provider
Patient wants to buy from Non-VA pharmacy

Chapter 8: Processing a Prescription

This chapter describes the option and processes used in processing prescriptions.

Patient Prescription Processing

[PSO LM BACKDOOR ORDERS]

The *Patient Prescription Processing* option is used to process outpatient medication orders from OERR V. 3.0. This option uses List Manager features that allow the pharmacy technician to perform the following actions on a prescription without leaving this option.

- Enter a new Rx
- Refill
- Copy (new)
- Renew
- Reprint
- Release
- Order a partial
- Pull early from suspense
- Show a profile
- View activity log (new)

When a new drug order is processed (new, renewal, finish, verify, copy, or an edit that creates a new order), order checks are performed. These include checking for duplicate drug, duplicate drug class, drug-drug interaction, and drug-drug allergy.

Following the installation of patches PSO*7*207 and OR*3*238 (Remote Data Interoperability (RDI) trigger patch), order checks will be made using additional data from the Health Data Repository Interim Messaging Solution (HDR-IMS) and the HDR-Historical (HDR-Hx). This will contain both Outpatient orders from other VAMCs as well as from Department of Defense (DoD) facilities, if available. All remote prescription statuses will be included in order checking for a new order being processed from within backdoor outpatient pharmacy and for new orders being placed by CPRS or by Inpatient Medications. Any remote Outpatient order that has been expired or discontinued for 30 days or less will be included in the list of medications to be checked.

If the verification site parameter is turned on, prescriptions entered by the technician will be non-verified and must be verified by the pharmacist. If the verification site parameter is turned off the label is queued to print as though the pharmacist has entered it unless the prescription causes a critical drug interaction. In which case, the prescription will be non-verified and must be verified by the pharmacist.

Actions are displayed in the action area of the screen. Actions with a parenthesis () around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy hidden actions described in “Chapter 2: List Manager”. If one of the hidden actions is selected and it is invalid, a message will display in the message window. Outpatient Pharmacy hidden actions are displayed with the letters OP next to the action.

With Patch PSO*7*233, when a name is selected, if the patient’s address is flagged with a Bad Address Indicator, a warning message is displayed. If the user has proper authorization (i.e., the PSO SITE parameter “EDIT PATIENT DATA” is set to Yes or the user holds the new PSO ADDRESS UPDATE security key), a prompt appears asking if the user wants to update the address.



For the *Patient Prescription Processing*, if a temporary address has no end date, the following text is displayed in the Status column: “(Temp address from XXX 99,9999 till (no end date))”.

Entering a New Order

If a double question mark (??) is entered at the “Select Action” prompt, the following hidden actions will display in the action area. Actions that apply only to outpatient orders are followed by (OP).

```
The following actions are also available:
RP Reprint (OP)          OTH Other OP Actions      LS Last Screen
RN Renew (OP)           DN Down a Line           FS First Screen
DC Discontinue (OP)     RD Re Display Screen     GO Go to Page
RL Release (OP)         PT Print List            + Next Screen
RF Refill (OP)          PS Print Screen          - Previous Screen
PP Pull Rx (OP)         > Shift View to Right    ADPL Auto Display(On/Off)
IP Inpat. Profile (OP)  < Shift View to Left    UP Up a Line
RS Reprint Sig Log      SL Search List
CM Manual Queue to CMOP QU Quit
```

First, a patient is selected.

Example: Entering a New Order

```
Select Pharmacy Technician's Menu Option: PATIENT Prescription Processing
Select PATIENT NAME: OPPATIENT16,ONE      4-3-41      000246802      YES      SC
VETERAN
Patient is enrolled to receive ScripTalk 'talking' prescription labels.

Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

[Patient Information Screen skipped]

Although “Quit” is the default at the “Select Action” prompt shown on the Patient Information screen, <Enter> at this prompt quits the screen and displays the Medication Profile. This Medication Profile includes any Non-VA Med orders documented via the CPRS GUI package.

```
Medication Profile          Jun 12, 2001 14:12:21          Page: 1 of 1
OPPATIENT16,ONE
  PID: 000-24-6802          Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)     Wt(kg): 90.45 (02/08/1999)

-----ACTIVE-----
#  RX #          DRUG          QTY ST  ISSUE DATE  LAST REF DAY
-----DISCONTINUED-----
1  503904$      AMPICILLIN 250MG CAP      80 E  05-25  05-25  0  10
2  503886$      DIGOXIN (LANOXIN) 0.2MG CAP      60 A> 05-07  05-07  5  30
3  503902      ACETAMINOPHEN 500MG TAB      60 DC>05-22  05-22  3  30

Enter ?? for more actions
PU Patient Record Update          NO  New Order
PI Patient Information            SO  Select Order
Select Action: Quit// NO  New Order
```

Typing in the letters "NO" at the "Select Action" prompt creates a new order.

Example: Entering a New Order (continued)

```
Medication Profile          May 22, 2001 10:44:56          Page:    1 of    1
(Patient information is displayed here.)
::
      Enter ?? for more actions
PU Patient Record Update          NO New Order
PI Patient Information            SO Select Order
Select Action: Quit// NO  New Order
-----
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
DRUG: ACETAMINOPHEN
  Lookup: GENERIC NAME
    1  ACETAMINOPHEN 1000MG TABLET          CN100
    2  ACETAMINOPHEN 160MG/5ML LIQUID      CN103
    3  ACETAMINOPHEN 325MG TABLET        CN103      INFECTIOUS DISEASE
  RESTRICTED TO
    4  ACETAMINOPHEN 650MG SUPPOS.        CN103
    5  ACETAMINOPHEN AND CODEINE 30MG     CN101
Press <RETURN> to see more, '^' to exit this list, '^ ^' to exit all lists, OR
CHOOSE 1-5: 1      1000MG TABLET          CN100
-----
*** SAME CLASS *** OF DRUG IN RX #46309525 FOR ACETAMINOPHEN 500MG TAB
CLASS: CN103
      Status: Active                      Issued: 09/21/05
      SIG: TAKE ONE TABLET BY MOUTH EVERY SIX(6) HOURS AS NEEDED
      QTY: 360                            # of refills: 3
      Provider: PROVIDER, ONE              Refills remaining: 3
                                          Last filled on: 09/21/05
                                          Days Supply: 90
-----
Discontinue RX # 46309525? NO -Prescription was not discontinued...
```

The system checks the medication selected for any duplicate drugs or classes, interactions, or allergies that are noted in the patient's local and remote record. This also includes any local Non-VA Meds. See the following example of local and remote order checking.

```
Now doing remote order checks. Please wait...
-----
*** SAME CLASS *** OF DRUG IN REMOTE RX FOR ASPIRIN 325MG BUFFERED TAB
>> CHEYENNE VAMROC
CLASS: CN103
      Rx #: 712996
      Status: ACTIVE                      Issued: 09/21/05
      SIG: TAKE ONE TABLET BY MOUTH EVERY DAY
      QTY: 30
      Provider: PROVIDER, TWO              Refills remaining: 11
                                          Last filled on: 09/21/05
                                          Days Supply: 30
Press Return to continue...<Enter>
Now doing drug interaction and allergy checks. Please wait...
A Drug-Allergy Reaction exists for this medication and/or class!
Drug: ACETAMINOPHEN 325MG TAB
Drug Class: CN103 NON-OPIOID ANALGESICS (REMOTE SITE(S))
Do you want to Intervene? Y// NO
```

The list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required and the value entered is displayed again to allow the user to confirm that it is correct.

Example: Entering a New Order (continued)

```
Available Dosage(s)
  1. 250MG
  2. 500MG
  3. 1000MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 3 500MG

You entered 500MG is this correct? Yes// <Enter> YES
```

For numeric dosages, the Dispense Units Per Dose value is calculated based on the strength of the dosage ordered divided by the strength of the medication ordered. The 500 mg dosage ordered will require two 250 mg capsules. The Dosage Ordered is re-displayed after the Dispense Units to allow the entry to be double-checked.

```
DISPENSE UNITS PER DOSE(CAPSULES): 2// <Enter> 2
Dosage Ordered: 500MG
```

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the stored list of possible routes, the entry will be expanded in the Sig.

```
ROUTE: PO// <Enter> ORAL PO MOUTH
or
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the drug ordered is displayed. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID// (FOUR TIMES A DAY)
```

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

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. Follow the number with an “H” to specify hours or an “M” to specify minutes.

NOTE: Do not use this field for Days Supply.

Example: Entering a New Order (continued)

```
LIMITED DURATION ( IN DAYS , HOURS OR MINUTES ) : 10 ( DAYS )
```

The CONJUNCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. AND is used for concurrent doses, such as “Take 1 tablet every morning AND take 2 tablets at bedtime.” THEN is used for consecutive doses, such as “Take 2 tablets daily for one week THEN take 1 tablet for five days.” EXCEPT is used to describe any dosing sequence that is not routine, such as “Take 1 tablet every day EXCEPT take no tablets Wednesday.” See Chapter 2 in the *User Manual - Supplemental* for examples.

```
CONJUNCTION : <Enter>
```

Any entry in the PATIENT INSTRUCTIONS field will first be checked to see if it contains any abbreviations that can be expanded. The entry will be added to the end of the Sig, after the dosing information, and the entire Sig will be displayed.

```
PATIENT INSTRUCTIONS : WF WITH FOOD
(TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD)
OTHER PATIENT INSTRUCTIONS : WF CON ALIMENTO
```

Patch PSS*1*47 adds two new optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file (#55) that stores if a patient has another language preference and if the patient’s PMI sheets should print in English or Spanish at the CMOP. The CMOP functionality was requested for future CMOP use. When printing locally from Outpatient Pharmacy this parameter is not used. These fields are accessed through the option Update Patient Record [PSO PAT] and the protocol Patient Record Update [PSO PATIENT RECORD UPDATE]. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS prompt, the expansion entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is calculated when possible. See Chapter 2 in the *User Manual - Supplemental* for more information on this calculation.

```
DAYS SUPPLY : (1-90) : 30 // 10
QTY ( CAP ) : 80 // <Enter> 80
```

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

Example: Entering a New Order (continued)

```

COPIES: 1// <Enter> 1
# OF REFILLS: (0-11): 11// 0
PROVIDER:      OPPROVIDER4,TWO
CLINIC:        OUTPT NURSE GREEN TEAM
MAIL/WINDOW:   WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (MAY 30, 2001)
FILL DATE: (5/30/2001 - 6/9/2001): TODAY// <Enter> (MAY 30, 2001)
Nature of Order: WRITTEN// ??

      Nature of Order Activity      Require      Print      Print on
      -----      E.Signature      Chart Copy      Summary
      -----      -----      -----      -----
WRITTEN
VERBAL                x                x                x
TELEPHONED           x                x                x
SERVICE CORRECTION
POLICY                x                x                x
DUPLICATE
SERVICE REJECT       x                x

Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// y YES
WAS COUNSELING UNDERSTOOD: NO// y YES

```

An option to add a progress note has been added. If “Yes” is entered at this prompt, the progress note entry will begin after the order information has been displayed and confirmed. The order is redisplayed, along with information on any service-connected disabilities on record.

```

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

Rx # 503906          05/30/01
OPPATIENT16,ONE          #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD

AMPICILLIN 250MG CAP
OPPROVIDER4,TWO          OPPHARMACIST4,THREE
# of Refills: 11

      SC Percent: 40%
      Disabilities: NONE STATED

Was treatment for Service Connected condition? NO

```

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

To determine if the order should be charged copay, eligible copay exemptions for the order are prompted one at a time. In this example, the user is prompted if the order is being prescribed for any of the service-connected conditions displayed. If any other service connected conditions apply to the patient, questions for each would appear. In this example, the patient is enrolled for Service Connection and Agent Orange exposure. Each applicable copay exemption prompt will appear no matter what is answered previously.

Example: Entering a New Order (continued)

```
Was treatment related to Agent Orange exposure? NO
Is this correct? YES// <Enter>
Another New Order for OPPATIENT16,ONE? YES//
```

Medications with non-numeric dosages, such as ointments and creams, will display non-numeric possible default dosages. Because the dosage is non-numeric, values for dispense units per dose and quantity cannot be calculated.

```
DRUG:      HYDROCORTISONE 0.5% CREAM      DE200      VISN FORM; 30 GM/TUBE (IEN)
          ...OK? Yes// (Yes)
Now doing order checks. Please wait...

Available Dosage(s)
  1. SMALL AMOUNT
  2. MODERATE AMOUNT
  3. LIBERALLY
  4. LARGE AMOUNT

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 2 MODERATE AMOUNT

You entered MODERATE AMOUNT is this correct? Yes// <Enter> YES
ROUTE: TOPICAL// TOPICAL
```

A default quantity cannot be calculated for complex orders containing the conjunction “Except.”

Entering a New Order – ePharmacy (Third Party Billable)

For patients who have third party insurance and have the appropriate eligibility requirements, the software will create an ePharmacy order upon finishing of the prescription entry.

After a WINDOW order is entered and finished, the billing data is sent to the Electronic Management Claims Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For MAIL orders, the communication between Outpatient Pharmacy and ECME happens either during the Local Mail Label Print or during the CMOP transmission.

The following example shows the creation of a new WINDOW order starting with the “DRUG:” prompt.

Example: Entering a New Order for ePharmacy Billing

```
DRUG: PREDNISONE
Lookup: GENERIC NAME
  1  PREDNISONE 1MG TAB          HS051
  2  PREDNISONE 20MG S.T.       HS051
  3  PREDNISONE 5MG TAB         HS051
CHOOSE 1-3: 3  PREDNISONE 5MG TAB          HS051
Now doing order checks. Please wait...
```

```
Previously entered ICD-9 diagnosis codes: <Enter>

Select Primary ICD-9 Code: <Enter>
VERB: TAKE
Available Dosage(s)
  1. 20MG
  2. 40MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 20MG

You entered 20MG is this correct? Yes// <Enter> YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// <Enter> 1
Dosage Ordered: 20MG

NOUN: TABLET
ROUTE: PO// <Enter>
  1  PO  ORAL (BY MOUTH)        PO
  2  PO  ORAL                   PO
CHOOSE 1-2: 2  ORAL            PO  BY MOUTH
Schedule: TID (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: WF
WITH FOOD

(TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD)
-----example continues-----
```

Example: Entering a New Order for ePharmacy Billing (continued)

```
DAYS SUPPLY: (1-90): 30// <Enter>
QTY ( TAB ) : 30// <Enter> 30
COPIES: 1// <Enter> 1
# OF REFILLS: (0-5): 5// <Enter>
PROVIDER: OPPROVIDER4,TWO
CLINIC: <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (NOV 02, 2005)
FILL DATE: (11/2/2005 - 11/3/2006): TODAY// <Enter> (NOV 02, 2005)
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES

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

Rx # 100003840          11/02/05
OPPATIENT,FOUR              #30
TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD

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

Is this correct? YES// <Enter> YES
```

Prescription 100003840 successfully submitted to ECME for claim generation.

```
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
```

Another New Order for OPPATIENT,FOUR? YES// NO

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

View of RX:

Medication Profile			Nov 02, 2005@07:33:29			Page: 1 of 1		
OPPATIENT, FOUR								
PID: 000-01-1322P			Ht (cm): _____ (_____)					
DOB: JAN 13, 1922 (83)			Wt (kg): _____ (_____)					
SEX: MALE								
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	100003840e	PREDNISONE 5MG TAB	30	A>	11-02	11-02	5	30
		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Denotes ePharmacy Rx </div>						
Enter ?? for more actions								
PU Patient Record Update			NO New Order					
PI Patient Information			SO Select Order					
Select Action: Quit//								

If a new order is rejected due to a Drug Utilization Review (DUR) or Refill Too Soon, the prescription will be marked as “REJECTED”, and the user will have the opportunity to resolve before continuing.

The following example uses the shows a sample ECME transmission rejection, and how to resolve the rejection error.

Example: Handling a Rejected New Order for ePharmacy Billing

```
Prescription 999999 successfully submitted to ECME for claim generation.
```

```
Claim Status:  
IN PROGRESS-Waiting to start  
IN PROGRESS-Waiting for packet build  
IN PROGRESS-Waiting for transmit  
IN PROGRESS-Transmitting  
E REJECTED
```

```
*** REJECT RECEIVED FROM THIRD PARTY PAYER ***
```

```
-----  
Division : ALBANY                                NPI#: 39393939  
Patient  : OPPATIENT,FOUR(000-01-1322P)  Sex: M      DOB: JAN 13,1922(83)  
Prescription : 99999999/0 - TESTOSTERONE (ANDROD  ECME#: 1234567  
Reject Type  : 88 - DUR REJECT received on FEB 27, 2006@10:58:25  
Payer Message: DUR Reject Error  
Reason       : ER (OVERUSE PRECAUTION)  
DUR Text     : ANDRODERM    DIS 5MG/24HR  
Insurance    : EMDEON  
Group Name   : RXINS  
Cardholder ID: 000011322P  
Contact: 800 555-5555  
Group Number: 12454  
-----
```

```
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// O  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.

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

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

Reason for Service Code : ER - OVERUSE PRECAUTION
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#: 0112303
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#: 0112306
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  OPHARM,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 Rx 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 Rx 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...

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
```

Using the Copy Action

If a double question mark (??) is entered at the “Select Action” prompt, the hidden actions on the following page 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

Use the Copy action to make a duplicate order. Any field of the newly created order can be edited. The original order will remain active, but the duplicate order check will be processed before the new order can be accepted.

Example: Using the Copy Action

```

Medication Profile          Jun 12, 2001 14:39:11          Page:    1 of    1
-----
OPPATIENT16,ONE
  PID: 000-24-6802          Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)     Wt(kg): 90.45 (02/08/1999)
-----
#  RX #          DRUG          QTY ST  ISSUE  LAST REF DAY
                                DATE  FILL  REM  SUP
-----
-----ACTIVE-----
1  503904$      AMPICILLIN 250MG CAP      80 E  05-25  05-25   0  10
2  503886$      DIGOXIN (LANOXIN) 0.2MG CAP      60 A> 05-07  05-07   5  30
3  503916      NADOLOLOL 40MG TAB        60 A> 06-12  06-12  11  30
-----DISCONTINUED-----
4  503902      ACETAMINOPHEN 500MG TAB      60 DC>05-22  05-22   3  30
-----
Enter ?? for more actions
PU  Patient Record Update          NO  New Order
PI  Patient Information             SO  Select Order
Select Action: Quit// SO  Select Order
Select Orders by number:  (1-4):3
  
```

The Order Number can be entered at the “Select Action” prompt instead of “SO”.

Once an order is selected, the Copy action can be used.

```

OP Medications (ACTIVE)    Jun 12, 2001 14:42:17    Page:    1 of    2
-----
OPPATIENT16,ONE
  PID: 000-24-6802          Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)     Wt(kg): 90.45 (02/08/1999)
-----
Rx #: 503916
(1) *Orderable Item: NADOLOLOL TAB *** (N/F) ***
(2)      CMOP Drug: NADOLOLOL 40MG TAB *** (N/F) ***
(3)      *Dosage: 40 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL
          *Schedule: BID
(4) Pat Instructions:
          SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(5) Patient Status: SERVICE CONNECTED
(6) Issue Date: 06/12/01          (7) Fill Date: 06/12/01
          Last Fill Date: 06/12/01 (Window)
+ Enter ?? for more actions
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                RF  Refill           RN  Renew
Select Action: Next Screen// CO  COPY
  
```

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

After “CO” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Accept” or “Edit”.

(New Order (Copy) screen displays merged to save space)

Example: Using the Copy Action (continued)

```
New OP Order (COPY)           Jun 12, 2001 14:47:53           Page:      1 of      2
OPPATIENT16,ONE
  PID: 000-24-6802                Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)            Wt(kg): 90.45 (02/08/1999)

  Orderable Item: NADOLOL TAB ***(N/F)***
(1)      CMOP Drug: NADOLOL 40MG TAB ***(N/F)***
(2) Patient Status: SERVICE CONNECTED
(3)      Issue Date: JUN 12,2001           (4) Fill Date: JUN 12,2001
(5) Dosage Ordered: 40 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      Route: ORAL
      Schedule: BID
(6)Pat Instruction:
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(7)      Days Supply: 30                   (8)      QTY (TAB): 60
(9)      # of Refills: 11                  (10)     Routing: WINDOW
(11)     Clinic: OUTPT NURSE BLUE TEAM
(12)     Provider: OPPOVIDER4,TWO          (13)     Copies: 1
(14)     Remarks: New Order Created by copying Rx # 503916.
      Entry By: OPPOVIDER4,TWO            Entry Date: JUN 12,2001 14:47:53

+      Enter ?? for more actions
AC      Accept                               ED      Edit
Select Action: Next Screen// AC      Accept
```

```
-----
DUPLICATE DRUG NADOLOL 40MG TAB in Prescription: 503916

      Status: Active                               Issued: 06/12/01
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
      QTY: 60                                       # of refills: 11
      Provider: OPPOVIDER4,TWO                     Refills remaining: 11
                                                    Last filled on: 06/12/01
                                                    Days Supply: 30
-----

Discontinue Rx # 503916? YES

Duplicate Drug will be discontinued after the acceptance of the new order.

Now doing order checks. Please wait...

Nature of Order: WRITTEN// ??
```

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

Example: Using the Copy Action (continued)

Nature of Order Activity	Require E.Signature	Print Chart Copy	Print on Summary
WRITTEN			x
VERBAL	x	x	x
TELEPHONED	x	x	x
SERVICE CORRECTION POLICY		x	x
DUPLICATE			
SERVICE REJECT	x	x	

Nature of Order: WRITTEN// <Enter> W
 WAS THE PATIENT COUNSELED: NO// <Enter>NO

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

Rx # 503919 06/12/01
 OPPATIENT16,ONE #60
 TAKE ONE TABLET BY MOUTH TWICE A DAY

NADOLOL 40MG TAB
 OPPROVIDER4,TWO OPPHARMACIST4,THREE
 # of Refills: 11

Is this correct? YES// <Enter>...
 -Rx 503916 has been discontinued...

SC Percent: 20%
 Disabilities:

KNEE CONDITION	10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS	10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS	0% - SERVICE CONNECTED
SEPTUM, NASAL, DEVIATION OF	0% - SERVICE CONNECTED
RESIDUALS OF FOOT INJURY	0% - SERVICE CONNECTED

Was treatment for Service Connected condition? **NO**

The Medication Profile screen is redisplayed at this point. Note that the orders tagged for patient copay charges have a dollar sign (\$) after the RX #.

Medication Profile		Jun 12, 2001 15:03:10	Page:	1 of	1			
OPPATIENT16,ONE								
PID: 000-24-6802			Ht(cm): 177.80 (02/08/1999)					
DOB: APR 3,1941 (60)			Wt(kg): 90.45 (02/08/1999)					
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	503904\$	AMPICILLIN 250MG CAP	80	E	05-25	05-25	0	10
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP	60	A>	05-07	05-07	5	30
3	503919\$	NADOLOL 40MG TAB	60	A>	06-12	06-12	11	30
-----DISCONTINUED-----								
4	503902	ACETAMINOPHEN 500MG TAB	60	DC>	05-22	05-22	3	30
Enter ?? for more actions								
PU	Patient Record Update		NO	New Order				
PI	Patient Information		SO	Select Order				
Select Action: Quit//								

Copying an ePharmacy Order

When copying an ePharmacy order, upon acceptance of the copied order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

```

Patient Information          Nov 04, 2005@09:19:26          Page: 1 of 1
OPPATIENT,FOUR
  PID: 000-01-1322P          Ht(cm): _____ (_____)
  DOB: JAN 13,1922 (83)     Wt(kg): _____ (_____)
  SEX: MALE

```

```

Eligibility: NSC, VA PENSION

Disabilities:

123123 A
BIRMINGHAM          PHONE: (205)4444444
ALABAMA 35235
Prescription Mail Delivery: Regular Mail

Allergies:

Adverse Reactions:

Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data      PU Patient Record Update
DD Detailed Allergy/ADR List       EX Exit Patient List
Select Action: Quit// <Enter> QUIT

```

```

Medication Profile          Nov 04, 2005@09:23:47          Page: 1 of 1
OPPATIENT,FOUR
  PID: 000-01-1322P          Ht(cm): _____ (_____)
  DOB: JAN 13,1922 (83)     Wt(kg): _____ (_____)
  SEX: MALE

```

#	RX #	DRUG	ISSUE QTY ST	LAST DATE	REF FILL	DAY REM SUP
-----ACTIVE-----						
1	100003852e	PREDNISONE 5MG TAB	30 A>	11-04	11-04	5 30

```

PU Patient Record Update          NO New Order
PI Patient Information            SO Select Order
Select Action: Quit// 1
-----example continues-----

```

Example: Copying an ePharmacy Order (continued)

```

Medication Profile          Nov 04, 2005@09:24:04          Page: 1 of 1
OPPATIENT,FOUR
PID: 000-01-1322P          Ht(cm): _____ (_____)
DOB: JAN 13,1922 (83)     Wt(kg): _____ (_____)
SEX: MALE

#  RX #          DRUG          QTY ST  DATE  FILL REM DAY
-----
OP Medications (ACTIVE)   Nov 04, 2005@09:24:17   Page: 1 of 3
OPPATIENT,FOUR
PID: 000-01-1322P          Ht(cm): _____ (_____)
DOB: JAN 13,1922 (83)     Wt(kg): _____ (_____)

Rx #: 100003852e
(1) *Orderable Item: PREDNISONONE TAB
(2)      CMOP Drug: PREDNISONONE 5MG TAB
(3)      *Dosage: 20 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL
          *Schedule: QID
          *Duration: 30 (DAYS)
(4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
          SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS
          WITH FOOD AVOIDING DAIRY FOODS
(5) Patient Status: OPT NSC

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

Once “Copy” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Edit” or “Accept.”

```

New OP Order (COPY)        Nov 04, 2005@09:24:17        Page: 1 of 2
OPPATIENT,FOUR
PID: 000-01-1322P          Ht(cm): _____ (_____)
DOB: JAN 13,1922 (83)     Wt(kg): _____ (_____)

Orderable Item: PREDNISONONE TAB
(1)      CMOP Drug: PREDNISONONE 5MG TAB
(2) Patient Status: OPT NSC
(3)      Issue Date: NOV 4,2005          (4) Fill Date: NOV 4,2005
(5) Dosage Ordered: 20 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          Route: ORAL
          Schedule: QID
          *Duration: 30 (DAYS)
(6) Pat Instruction: WITH FOOD AVOIDING DAIRY FOODS
          SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30
          DAYS WITH FOOD AVOIDING DAIRY FOODS

+ Enter ?? for more actions
AC  Accept          ED  Edit
Select Action: Next Screen// AC  Accept
-----example continues-----
  
```

Example: Copying an ePharmacy Order (continued)

DUPLICATE DRUG PREDNISONE 5MG TAB in Prescription: 100003852

Status: Active Issued: 11/04/05
SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30
DAYS WITH FOOD AVOIDING DAIRY FOODS
QTY: 30 # of refills: 5
Provider: OPPROVIDER4,TWO Refills remaining: 5
Last filled on: 11/04/05
Days Supply: 30

Discontinue Rx # 100003852? **YES**

Duplicate Drug will be discontinued after the acceptance of the new order.

Now doing order checks. Please wait...

Nature of Order: WRITTEN// **<Enter>** W
WAS THE PATIENT COUNSELED: NO// **YES**
WAS COUNSELING UNDERSTOOD: NO// **YES**

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

Rx # 100003853 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// **YES...**
Reversing prescription 100003852.

Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E REVERSAL ACCEPTED

-Rx 100003852 has been discontinued...

Prescription 100003853 successfully submitted to ECME for claim generation.

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

View of RX:

Medication Profile		Nov 04, 2005@09:25:14	Page:	1 of	1			
OPPATIENT,FOUR								
PID: 000-01-1322P			Ht(cm): _____ (_____)					
DOB: JAN 13,1922 (83)			Wt(kg): _____ (_____)					
SEX: MALE								
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	100003853e	PREDNISONE 5MG TAB	30	A>	11-04	11-04	5	30
Enter ?? for more actions								
PU	Patient Record Update		NO	New Order				
PI	Patient Information		SO	Select Order				
Select Action: Quit//								

Renewing a Prescription

This action allows the pharmacy technician to process renewals for existing orders.

Example: Renewing a Prescription

[This example begins after an order has been selected from the Medication Profile screen.]

```

OP Medications (ACTIVE)          Jun 12, 2001 15:08:43          Page: 1 of 3
OPPATIENT16,ONE
  PID: 000-24-6802                Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)            Wt(kg): 90.45 (02/08/1999)
-----
Rx #: 503886$
(1) *Orderable Item: DIGOXIN CAP,ORAL
(2)      CMOP Drug: DIGOXIN (LANOXIN) 0.2MG CAP
(3)      *Dosage: .2 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: CAPSULE
          *Route: ORAL (BY MOUTH)
          *Schedule: Q12H
(4)Pat Instructions: TAKE AFTER MEALS
  Provider Comments: TAKE AFTER MEALS
          SIG: TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS TAKE AFTER MEALS
(5) Patient Status: SERVICE CONNECTED
(6) Issue Date: 05/07/01          (7) Fill Date: 05/07/01
+      Enter ?? for more actions
-----
DC  Discontinue      PR  Partial      RL  Release
ED  Edit             RF  Refill       RN  Renew
Select Action: Next Screen// RN Renew
-----
FILL DATE: (6/12/2001 - 6/13/2002): TODAY// <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// Y ES
WAS COUNSELING UNDERSTOOD: NO// Y ES

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

Now Renewing Rx # 503886 Drug: DIGOXIN (LANOXIN) 0.2MG CAP

Now doing order checks. Please wait...

503886A      DIGOXIN (LANOXIN) 0.2MG CAP      QTY: 60
# OF REFILLS: 5 ISSUED: 06-12-01
SIG: TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS TAKE AFTER MEALS
FILLED: 06-12-01
ROUTING: WINDOW      PHYS: OPPROVIDER4,TWO

Edit renewed Rx ? Y// <Enter> ES

```

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

At this point, the order can be edited as discussed in the Editing a New Order example. If the order is not edited, the order is renewed and the display returns to the Medication Profile screen.

The user may renew more than one order on the same patient by typing the desired order numbers separated by a comma (for example: 1,3,5).

After the edits are made, the order is redisplayed and it can be re-edited or accepted.

If an order was entered before patch PSO*7*46 update, the user will be prompted to fill in any missing dosing information needed as illustrated in this example.

Example: Renewing a Prescription (continued)

```
Edit renewed Rx ? Y// NO

Dosing Instruction Missing!!

Drug: CALCIUM CARBONATE 650MG TAB
TAKE 1 TABLET(S) BY MOUTH THREE TIMES A DAY

FILLED: 04-02-01
ROUTING: WINDOW      PHYS: OPPROVIDER29,TWO

Edit renewed Rx ? Y// <Enter> ES
Available Dosage(s)           Apr 02, 2001@10:49:06
  1. 650MG
  2. 1300MG
Select from list of Available Dosages or Enter Free Text Dose: 1 650MG

You entered 650MG is this correct? Yes// <Enter> YES
DISPENSE UNITS PER DOSE(TAB): 1// <Enter> 1
Dosage Ordered: 650MG
ROUTE: PO// <Enter> ORAL      PO MOUTH
Schedule: TID (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): <Enter>
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: <Enter>

(TAKE ONE TAB BY MOUTH THREE TIMES A DAY)

1460971A      CALCIUM CARBONATE 650MG TAB      QTY: 100
# OF REFILLS: 10  ISSUED: 04-02-01
SIG: TAKE ONE TAB BY MOUTH THREE TIMES A DAY
```



Original Provider Comments are not carried over to any renewals in Outpatient Pharmacy.

Renewing an ePharmacy Order

When renewing an ePharmacy order, upon acceptance of the renewed order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

[This example begins after an order is selected from the Medication Profile screen.]

```
OP Medications (ACTIVE)          Nov 04, 2005@11:48:14          Page: 1 of 3
OPPATIENT,FOUR
  PID: 000-01-1322P              Ht (cm): _____ (_____)
  DOB: NOV 12,1975 (29)         Wt (kg): _____ (_____)
-----
Rx #: 100003642$e
(1) *Orderable Item: SIMETHICONE TAB,CHEWABLE
(2)      Drug: SIMETHICONE 40MG TAB
(3)      *Dosage: 40 (MG)
          Verb: CHEW
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL
          *Schedule: TID
(4) Pat Instructions:
          SIG: CHEW ONE TABLET BY BY MOUTH THREE TIMES A DAY
(5) Patient Status: OPT NSC
(6)      Issue Date: 08/11/05          (7) Fill Date: 08/11/05
          Last Fill Date: 08/11/05 (Window)
+      Enter ?? for more actions
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                RF  Refill           RN  Renew
Select Action: Next Screen// RN Renew
-----
FILL DATE: (11/4/2005 - 11/5/2006): TODAY// <Enter> (NOV 04, 2005)
MAIL/WINDOW: WINDOW// <Enter>WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO//<Enter> NO

Now Renewing Rx # 100003642 Drug: SIMETHICONE 40MG TAB

Now doing order checks. Please wait...

100003642A SIMETHICONE 40MG TAB QTY: 90
# OF REFILLS: 5 ISSUED: 11-04-05
SIG: CHEW ONE TABLET BY BY MOUTH THREE TIMES A DAY
FILLED: 11-04-05
ROUTING: WINDOW PHYS: OPPROVIDER4,TWO

Edit renewed Rx ? Y// <Enter> ES
```

Example: Renewing an ePharmacy Order (continued)

(To save space, only the second Prescription Renew screen is displayed in this example.)

```
Prescription Renew          Jun 04, 2001 16:18:17          Page:    2 of    2
OPPATIENT,FOUR
  PID: 000-01-1322P                      Ht(cm): _____ (_____)
  DOB: NOV 12,1975 (29)                  Wt(kg): _____ (_____)
+
  Days Supply: 30
  QTY ( ): 90
(3) # of Refills: 5
(4) Routing: WINDOW
(5) Clinic:
(6) Provider: OP PROVIDER4,TWO
(7) Copies: 1
(8) Remarks: RENEWED FROM RX # 100003642
  Entry By: OPPHARMACIST4,THREE          Entry Date: NOV 4,2005
11:56:31

  Enter ?? for more actions
AC  Accept                               DC  Discontinue
BY  Bypass                               ED  Edit
Select Item(s): Quit// 5

CLINIC: 3EN
```

```
Prescription Renew          Jun 04, 2001 16:24:32          Page:    2 of    2
OPPATIENT,FOUR
  PID: 000-01-1322P                      Ht(cm): _____ (_____)
  DOB: NOV 12,1975 (29)                  Wt(kg): _____ (_____)
+
  Days Supply: 30
  QTY ( ): 90
(3) # of Refills: 5
(4) Routing: WINDOW
(5) Clinic:
(6) Provider: OP PROVIDER4,TWO
(7) Copies: 1
(8) Remarks: RENEWED FROM RX # 100003642
  Entry By: OPPHARMACIST4,THREE          Entry Date: NOV 4,2005 11:56:31

  Enter ?? for more actions
AC  Accept                               DC  Discontinue
BY  Bypass                               ED  Edit
Select Item(s): Quit// AC Accept

  SC Percent: 40%
  Disabilities: NONE STATED

Was treatment for Service Connected condition? NO// <Enter>
```

Example: Renewing an ePharmacy Order (continued)

```
Reversing prescription 100003642.  
  
Claim Status:  
Reversing and Rebilling a previously submitted claim...  
Reversing...  
IN PROGRESS-Waiting for transmit  
IN PROGRESS-Transmitting  
IN PROGRESS-Waiting to process response  
E REVERSAL ACCEPTED  
  
-Rx 100003642 has been discontinued...  
  
Prescription 100003642A 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-Receiving response  
E PAYABLE
```

Original Provider Comments are not carried over to any renewals in Outpatient Pharmacy.



Chapter 9: Pull Early from Suspense

This chapter describes the options used for handling suspended prescriptions.

Pull Early from Suspense

[PSO PNDRX]

This option is used to pull a specific prescription or all prescriptions for a patient early. If a prescription is pulled early using this option, it will not be associated with any printed batch, and the user will not be able to reprint a label with the *Reprint Batches from Suspense* option. Since prescriptions that are pulled early from suspense do not belong to any printed batch and cannot be reprinted from suspense, there is no reason to leave them in suspense.

The user may also edit the “Method of Pickup”. For the prompt "Pull Rx(s) and delete from Suspense", the user should answer **YES** to pull the prescriptions, and they will always be deleted from suspense.

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. 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.

Chapter 10: 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.

(This page included for two-sided copying.)

Chapter 11: Releasing Medication

This chapter describes the option used for releasing medications.

Release Medication

[PSO RELEASE]

The *Release Medication* option is used at the time the prescription is filled and ready to be given to the patient. Inventory is decreased, certain fields in the file are updated, and a copay is generated if the action is applicable to the prescription. With this option, prescriptions can be batch processed. Communication is made with the Integrated Funds Control, Accounting and Procurement (IFCAP) and Integrated Billing (IB) software to generate copay charges. IFCAP and IB software handle patient billing, tracking of charges, and payment received.

The copay status of a prescription is re-evaluated whenever a fill is released. Various actions can occur based on changes to the criteria that determine the copay status of a prescription. The actions that may result at the time a fill is released are described below.

1. **No action is taken.** No changes to the criteria that determine copay status of a prescription have occurred.
2. **The copay status of the prescription is automatically reset and an entry is placed in the Copay activity log.**

Example: The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay.

3. **The copay status of the prescription is automatically reset, an entry is placed in the Copay activity log, and a MailMan message is generated detailing missing information required for user follow-up.**

Example: The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay. The patient has been documented as being exposed to Southwest Asia Conditions (SWAC) during Persian Gulf War service since the last fill. A MailMan message will be generated informing the user that the 'Is this Rx for treatment related to service in SW Asia?' question must be addressed and documented using the *Reset Copay Status/Cancel Charges* option.

4. **A MailMan message is generated detailing missing information required for user follow-up.**

Example: A veteran is documented as having Agent Orange exposure. Refill #2 for a prescription entered into the system before the new medication copay exemptions took effect on January 1, 2002 is released. The prescription is copay eligible. A MailMan message will be generated informing recipients that the 'Is this Rx for treatment of Vietnam-Era Herbicide (Agent Orange) exposure?' question must be addressed. The copay status of the Rx may change based on the response entered using the *Reset Copay Status/Cancel Charges* option.

If a MailMan message is generated at the time a prescription fill is released, the recipients of the message will be the provider of record, the pharmacy user who finished the order, and holders of the PSO COPAY key. The message lists the patient name, prescription number, and medication ordered, current copay status, and applicable copay exemption questions that need addressing to determine the prescription's copay status. The *Reset Copay Status/Cancel Charges* option must be used to enter the responses to the medication copay exemption questions listed in the MailMan message. If responses are not entered for the applicable medication copay exemption questions, any subsequent refills when released for this prescription and possibly other prescriptions for this patient will continue to generate the same MailMan message.

Example: MailMan Message

```
Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500) [#30364] 10/11/05@19:56
35 lines
From: OUTPATIENT PHARMACY PACKAGE In 'IN' basket. Page 1
-----
OPPATIENT29,ONE (6543P) CHEYENNE VAM&ROC
Eligibility: SC LESS THAN 50% SC%: 20
REIMBURSABLE INSURANCE

Disabilities: ARTHRITIS-10%(SC), FOREARM CONDITION-5%(NSC),
FOREARM CONDITION-4%(NSC), BENIGN EYE GROWTH-0%(NSC),
LOSS OF FIELD OF VISION-20%(SC),

Rx# 101906 (1) COPAY
ALBUTEROL SO4 0.083% INHL 3ML

Due to a change in criteria, additional information listed below is needed
to determine the final VA copay and/or insurance billable status for this Rx
so that appropriate action can be taken by pharmacy personnel.

Is this Rx for a Service Connected Condition?

Is this Rx for treatment related to service in SW Asia?

This message has been sent to the provider of record, the pharmacist who
finished the prescription order, and all holders of the PSO COPAY key.

Enter RETURN to continue or '^' to exit: <Enter>
-----example continues-----
```

Example: MailMan Message (continued)

```
Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500) [#30364] Page 2
-----
Providers:
Please respond with your answer to the question(s) as a reply to this
message. The prescription will be updated by the appropriate staff.

Staff assigned to update the Prescription responses:
Please use the RESET COPAY STATUS/CANCEL CHARGES option to enter the responses
to the questions above, which may result in a Rx copay status change and/or
the need to remove VA copay charges or may result in a charge to the patient's
insurance carrier.

Note: The SC question is now asked for Veterans who are SC>49% in order to
determine if the Rx can be billed to a third party insurance. These Veterans
will NOT be charged a VA copay.

Supply and investigational drugs are not charged a VA copay but could be
reimbursable by third party insurance.

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

An annual copayment cap is applied to patients in specific priority enrollment groups. Once a patient reaches the annual copayment cap, no further medication copay charges will be billed for the calendar year. An entry to that effect is made to the Copay Activity Log. The '\$' indicator remains next to the prescription number to indicate that the prescription is still copay eligible.

Integrated Billing software keeps track of all prescription fills not billed due to the annual cap.

Example: Copay Activity Log When Annual Cap Reached

```
Copay Activity Log:
#   Date       Reason                Rx Ref      Initiator Of Activity
=====
1   10/23/01    ANNUAL CAP REACHED   ORIGINAL    OP PROVIDER11,TWO
Comment: NO BILLING FOR THIS FILL
```

If for whatever reason (e.g. prescription fill is returned to stock and copay charges cancelled), a patient falls below the annual copayment cap, the Integrated Billing package can initiate copay charges to bring the patient back up to the annual copayment cap. Integrated billing software will go back and bill a copay charge for those fills previously not charged due to the annual cap, bringing the patient's total copayment up to the cap. Whenever this occurs an entry will be placed in the Copay activity log.

Example: Copay Activity Log With IB-Initiated Charge

```
Copay Activity Log:
#   Date       Reason                Rx Ref      Initiator Of Activity
=====
1   10/23/01    ANNUAL CAP REACHED   ORIGINAL    OP PROVIDER11,TWO
Comment: NO BILLING FOR THIS FILL
2   10/23/01    IB-INITIATED COPAY   ORIGINAL    O PROVIDER11,TWO
Comment: PARTIAL CHARGE
```

If a prescription is not in a releasable status, the user will be given an error message, such as:

- Prescription has a status of (status) and is not eligible for release.
- Prescription was deleted.
- Improper barcode format.
- Non-existent prescription.

Copay is not charged for a partial fill.

*****Important*****

This is a mandatory function that the pharmacy must use.

Changes to Releasing Orders Function - Digitally Signed Orders Only

The release function in the *Patient Prescription Processing* option has been modified with patch PSO*7*131 to require that all digitally signed orders for Schedule II controlled substances (CSII orders) be released through the *Outpatient Rx's* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user is advised that the order must be released through the *Outpatient Rx's* option in the *Controlled Substances* (CS) menu. The same message displays if a user attempts to release a digitally signed CSII order during Speed Release or when using the *Release Medication* option.

Changes to Releasing Orders Function - ScripTalk®

The release function in the *Patient Prescription Processing* option has been modified to display a message to the user when the site is using a Bingo Board and when the patient is enrolled in ScripTalk®. This message will alert the user that the patient is enrolled in ScripTalk® and may need to have a verbal announcement that the prescription(s) is ready, instead of a visual announcement.

Example: Releasing Medication to a ScripTalk® Patient

```
Prescription Number 400693 Released
No Refill(s) to be Released
No Partial(s) to be Released

OPPATIENT16,ONE added to the WAITING display.
This patient is enrolled in ScripTalk and may benefit from
a non-visual announcement that prescriptions are ready.

Press Return to Continue:
```

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 the DRUG file.

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 the Electronic Claims Management Engine (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
Press Return to Continue:
```

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
```

Chapter 12: Updating a Patient's Record

This chapter describes the option used for updating a patient's record.

Update Patient Record

[PSO PAT]

Use this option to update the patient information currently in the computer and to update patient records being viewed by using the *Patient Record Update* screen action. If implementing Other Language Modifications, use either to set a patient's other language preference.

In support of Registration patch DG*5.3*522, the Outpatient Pharmacy software provides for the automatic population of city, state, and county based on entry of a zip code.

Example: Updating a patient record

```
Bingo Board Display: OUTPATIENT// <Enter>
Update Patient Record

Select Patient:      OPPATIENT,ONE      12-4-53      000007890      YES      SC VETERAN

OPPATIENT, ONE      ID#:      000-00-7890
4500 S MAIN ST      DOB:      DEC 4,1953
ADDRESS LINE2
LINE 3 OF ADDRESS
MADISON      PHONE: 555-555-1653
WISCONSIN 53705      ELIG: SC LESS THAN 50%
SC%: 10

WEIGHT(Kg):      HEIGHT(cm):
DISABILITIES: ARTHRITIS-10% (SC), FOREARM CONDITION-5% (NSC),
FOREARM CONDITION-4% (NSC), BENIGN EYE GROWTH-0% (NSC),
LOSS OF FIELD OF VISION-20% (SC),

ALLERGIES:

ADVERSE REACTIONS:
```

If the PSO site parameter is set to allow editing of patient data, this prompt, "Do you want to update the Permanent address/phone? //N", is displayed. If the user enters "NO", then the software will not allow the user to update the permanent address and Bad Address Indicator fields.

```
Do you want to update the address/phone? NO// YES
Update (P)ermanent address, (T)emporary, or (B)oth: BOTH// PERMANENT
STREET ADDRESS [LINE 1]: 4500 S MAIN ST// 4800 S MAIN ST
STREET ADDRESS [LINE 2]: ADDRESS LINE2// <Enter> ADDRESS LINE2
STREET ADDRESS [LINE 3]: LINE 3 OF ADDRESS// <Enter> LINE 3 OF ADDRESS
ZIP+4: 53705// <Enter> 53705

Select one of the following:
```

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

```

1          MADISON*
CITY: MADISON// <Enter> *
STATE: WISCONSIN
COUNTY: DANE
PHONE NUMBER [RESIDENCE]: 555-555-1653// 555-555-1653
PHONE NUMBER [WORK]:
BAD ADDRESS INDICATOR: ?

Please enter 1 if the address is 'UNDELIVERABLE', 2 if the patient
is 'HOMELESS', or 3 for 'OTHER' bad address reasons.
Choose from:
1          UNDELIVERABLE
2          HOMELESS
3          OTHER
Are you sure that you want to save the above changes? YES
Change saved.

```

Changes to the permanent address/Bad Address Indicator will not be saved until the prompt “Are you sure that you want to save the above changes?” is answered YES.

```

Press ENTER to continue: <Enter>

Temporary Address:

TEMPORARY ADDRESS ACTIVE?: NO// <Enter> NO

Press Return to continue: <Enter>

PHONE NUMBER [CELLULAR]: <Enter>
CNH CURRENT: <Enter>
FEE HOSPITAL I.D.: <Enter>
REMARKS: <Enter>

>>PHARMACY PATIENT DATA<<

CAP: <Enter>
MAIL: <Enter>
MAIL STATUS EXPIRATION DATE: <Enter>
DIALYSIS PATIENT: <Enter>
NARRATIVE: <Enter>
Eligibility: COLLATERAL OF VET. <Enter>
Disabilities: <Enter>
PATIENT STATUS: SERVICE CONNECTED// <Enter>
COMMUNITY NURSING HOME: <Enter>
NURSING HOME CONTRACT: <Enter>
LAST DATE OF CONTRACT: <Enter>
RESPITE PATIENT START DATE: <Enter>
RESPITE PATIENT END DATE: <Enter>
OTHER LANGUAGE PREFERENCE: <Enter>
PMI LANGUAGE PREFERENCE: <Enter>

```

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.
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.
APSP	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
Bypass	Take no action on a medication order.
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.
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.
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.

Acronym/Term	Definition
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
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.
Finish	Term used for completing orders from Order Entry/Results Reporting V. 3.0.
GUI	Acronym for Graphical User Interface.
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 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.

Acronym/Term	Definition
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.
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.

Acronym/Term	Definition
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> <p>Pending - A prescription that has been entered through OERR.</p> <p>Refill - A second or subsequent filling authorized by the provider.</p> <p>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.

Acronym/Term	Definition
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.
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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