

Outpatient Pharmacy

**ePharmacy Phase 4 COB**

**E-Claims Management Engine (ECME)**

**RELEASE NOTES**

BPS\*1\*8

August 2010

Department of Veterans Affairs

**V***IST***A** Health   
Systems Design & Development

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# Introduction

This patch has enhancements that extend the capabilities of the **V***IST***A** ePharmacy billing system, primarily to allow for the electronic submission of secondary pharmacy claims. Below is a list of all the applications involved in this project along with their patch number:

APPLICATION/VERSION PATCH

Integrated Billing (IB) V. 2.0 IB\*2\*411

Electronic Claims Management Engine (ECME) V. 1.0 BPS\*1\*8

Outpatient Pharmacy (OP) V. 7.0 PSO\*7\*290

The three patches (PSO\*7\*290, IB\*2\*411, and BPS\*1\*8) are being released in the Kernel Installation and Distribution System (KIDS) multi-build distribution BPS PSO IB BUNDLE 4.0 For more specific instruction please refer to the installation steps provided in each of the patches.

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# Patch Description and Installation Instructions

DHCP Patch Display Page: 1

=============================================================================

Run Date: SEP 01, 2010 Designation: BPS\*1\*8

Package : E CLAIMS MGMT ENGINE Priority : MANDATORY

Version : 1 Status : RELEASED

=============================================================================

Associated patches: (v)BPS\*1\*7 <<= must be installed BEFORE `BPS\*1\*8'

Subject: ePHARMACY COB SUPPORT

Category: ROUTINE

DATA DICTIONARY

Description:

===========

This patch has enhancements which extend the capabilities of the Veterans

Health Information Systems and Technology Architecture (VistA) electronic

pharmacy (ePharmacy) billing system. Below is a list of all the

applications involved in this project along with their patch number:

APPLICATION/VERSION PATCH

--------------------------------------------------------------

OUTPATIENT PHARMACY (OP) V. 7.0 PSO\*7\*290

INTEGRATED BILLING (IB) V. 2.0 IB\*2\*411

ELECTRONIC CLAIMS MANAGEMENT ENGINE (ECME) V. 1.0 BPS\*1\*8

The three patches (PSO\*7\*290, IB\*2\*411 and BPS\*1\*8) are being released in

a Kernel Installation and Distribution System (KIDS) multi-build

distribution bundle BPS PSO IB BUNDLE 4.0. For more specific instructions

please refer to the installation steps provided in each of the patches.

The main purpose of this patch is to implement functionality that

supports e-billing of the patient’s secondary insurance plans. These

modifications allow the VA to send additional claims electronically to the

patient's secondary insurances in order to reimburse money from those

payers that are responsible for the payments but were not billed

previously. Thus this enhancement will help VA sites to increase their

revenue.

While claims to the Primary insurance companies are sent automatically,

the claims to the Secondary insurance companies can now be sent manually

by using the new menu option Process Secondary/TRICARE Rx to ECME [BPS COB

PROCESS SECOND TRICARE. The same menu option can also be used to manually

generate primary claims if the patient has a dual eligibility (for

example, a TRICARE patient has both reimbursable insurance and TRICARE

plans with Pharmacy coverage), these cases were not previously handled by

the software. With this enhancement patch, duel eligible patients can now

be manually billed using the ePharmacy software.

Two new reports are introduced with this patch to support both secondary

billing and primary billing for TRICARE patients. The first report,

Potential Secondary Rx Claims Report [BPS COB RPT SECONDARY CLAIMS], will

identify prescriptions/refills that potentially can be billed to the

secondary insurance plans. The second report, Potential TRICARE Claims

Report [BPS COB RPT TRICARE CLAIMS], will identify prescriptions/refills

for TRICARE patients that potentially can be billed to the TRICARE

insurance plans.

All three new menu options are combined together under the new ECME

Pharmacy COB [BPS COB MENU] menu:

COB ECME Pharmacy COB ...

SEC Potential Secondary Rx Claims Report

TRI Potential TRICARE Claims Report

PRO Process Secondary/TRICARE Rx to ECME

This patch modifies the Electronic Claims Management Engine v1.0

application as described below:

1. ECME engine:

The modifications made in this patch allow:

- the engine to recognize secondary claims and process additional COB

(Coordination Of Benefits) fields specific for secondary claims

- the engine to use specific plans and rate types selected by the user

- specific data collected for secondary claims to be stored in the BPS

TRANSACTION, BPS LOG OF TRANSACTIONS, BPS CLAIMS and BPS REQUESTS files

- specific data collected for secondary claims to be processed, formatted

and included in HL7 messages sent to the payer

- specific entries in the BPS NCPDP FIELD DEFS file (#9002313.91) to be

updated in order to process the additional COB fields and transmit them

to the secondary payer in the correct format

- COB Indicator information to be returned in the EN^BPSNCPDP API

- the ECME to send reject codes to Outpatient Pharmacy along with the COB

indicator so the Pharmacy software can distinguish reject codes returned

by secondary and primary payers

The new routine BPSFLD01 was created to store GET, SET and FORMAT code to

support processing of the COB fields transmitted to the secondary payers.

The claim status code was adjusted to provide correct status information

for secondary and primary claims.

The API DUR1^BPSNCPD3 (ICR #4560) was modified to allow the calling

application to specify the COB (payer sequence) indicator of the claim

for which it is called and to implement a new format of the array for

returned values.

The testing tool was modified to process secondary claims.

2. ECME User Screen modifications to display COB (payer sequence)

indicators:

2.1. Main Display Screen and Further Research Screen modifications.

To distinguish primary and secondary claims displayed on the screen, each

status line is supplied with COB indicators: "p" for primary and "s" for

secondary claims. Status of another claim associated with the same

prescription/refill (if any) is displayed in parenthesis.

9.1 ACETAMINOPHEN 650 12345-4321-22 03/02 102287 1/0113558 W RT DIS/NR

p-Reversal accepted

9.2 MEDROXYPROGESTRON 00009-0050-02 02/11 102289 0/0113560 W RT ACT/RL

s-Payable (p-Payable)

2.2. The Print Claim Log screen displays a new label to indicate the COB

insurance level:

Rx Coordination of Benefits: PRIMARY

2.3. The initial page of the developer log was updated to display the

information for the specific claim line selected.

Insurance: COB INSURANCE

RX Coord of Benefits: Secondary

The subsequent pages are based upon the prescription and fill and are not

able to differentiate between insurances. However, a log entry

indicating the COB level will be added each time the prescription and fill

is processed.

BPSOSRB-Secondary Insurance

BPSOSQA-Secondary Insurance

3. Reversing claims:

The primary claim cannot be reversed if there is a payable secondary

claim. In such a case the user will be advised to reverse the secondary

claim first.

1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT ACT/RL

cannot be Reversed if the secondary claim is payable.

Please reverse the secondary claim first.

4. Resubmit Claims and Resubmit claims w/EDITS (RED) functionality:

The primary claim cannot be resubmitted if there is a payable secondary

claim. In such a case the user shall be advised to reverse the secondary

claim first.

1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT ACT/RL

Are you sure?(Y/N)? y YES

The claim:

1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT ACT/RL

cannot be Resubmitted if the secondary claim is payable.

Please reverse the secondary claim first.

5. Send to Worklist functionality:

The ECME software was modified to

- allow secondary claims to be sent to the Pharmacy Worklist manually

from the User Screen,

- send Refill Too Soon and DUR rejects for secondary claims to the

Pharmacy Worklist automatically.

6. ECME Claim Results and Status reports:

The ECME Claim Results and Status reports (Payable Claims Report [BPS RPT

PAYABLE], Rejected Claims Report [BPS RPT REJECTION], Reversal Claims

Report [BPS RPT REVERSAL], Claims Submitted, Not Yet Released [BPS RPT NOT

RELEASED], Recent Transactions [BPS RPT RECENT TRANSACTIONS], and Closed

Claims Report [BPS RPT CLOSED CLAIMS]) were modified to display the COB

indicators. The Excel format of the reports include the COB indicator of

the submitted claim as a new piece of data in the data string.

7. ECME Claims-Response Inquiry [BPS RPT CLAIMS RESPONSE] report:

The report reflects new COB data sent in secondary claims.

8. ECME Potential Secondary Rx Claims Report [BPS COB RPT SECONDARY

CLAIMS]:

This new report returns all primary prescription claims, whether

processed electronically or paper, that has possible secondary insurance

identified in the patient insurance file.

9. Potential TRICARE Claims Report [BPS COB RPT TRICARE CLAIMS]:

This new report returns prescriptions that have not yet been billed for

any patient who has an active insurance plan with a type of plan = TRICARE

and who has a dual eligibility (veteran and TRICARE) and whose

prescription Rx Patient Status is not exempt for TRICARE Billing. This

report also includes prescriptions for patients who have TRICARE only in

case of the system not being available and the prescription not being

processed automatically by ECME.

10. Process Secondary/TRICARE Rx to ECME [BPS COB PROCESS SECOND TRICARE]:

The new option was introduced to process the claims identified on the new

reports. This option will submit the claim to ECME and also can be

used to resubmit the claim when the user needs to change data specific

for secondary claims. Any other processing on this claim can be done

through the existing actions available on the ECME User Screen.

When processing a claim using a specific prescription number, the users

will need to select the fill number from the list provided by the software

to generate a claim. The user will be required to enter the billing rate

type since there are 2 types of claims that will primarily be using this

option. Reimbursable Insurance and TRICARE (including TRICARE Reimbursable

Insurance) are the only types of Billing Rates that will be allowed to be

used for ECME billing at this time.

When processing the secondary claim, the users will be presented with the

secondary claim data and will be prompted to edit this data if

necessary. Secondary claim data elements include:

Other Coverage Code

Other Payer Coverage Type

Other Payer ID Qualifier

Other Payer ID

Other Payer Date

If the primary payer paid the primary claim:

Other Payer Amount Paid Qualifier (mult)

Other Payer Amount Paid (mult)

If the primary payer rejected the primary claim:

Other Payer Reject Codes (mult)

This option can also be used to resubmit secondary claims when the user

needs to edit the specific secondary claims information submitted

previously. The user will be prompted for the same information and this

time the default values for the prompts will be set to data submitted in

the latest transaction. In addition during resubmission the user can

change the secondary payer and the rate type if needed. The resubmission

is allowed only for rejected or reversed secondary claims. The payable

claims need to be reversed in the User Screen before they can be

resubmitted through this menu option.

This option also allows the user to submit and resubmit primary claims

for prescriptions/refills for TRICARE patients and patients with dual

eligibility. When processing primary claims the users will be prompted to

select a primary payer for the e-claim and the rate type. The software

allows the user to resubmit the existing primary claims and change the

payer and/or the rate type if needed. The resubmission is allowed only

for rejected or reversed claims. The payable claims need to be reversed

in the User Screen before they can be resubmitted through this menu

option.

11. COB indicators for Pharmacy Activity log entries:

ECME code was modified to add COB indicators to Pharmacy Activity log

when the claim is resubmitted via User Screen actions "Resubmit Claim"

and "Resubmit Claim w/EDITS" and also when it is reversed manually via

"Reverse Payable Claim" action or automatically by ECME nightly processing

job (auto reversals).

This patch addresses the following New Service Request (NSR):

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There is no NSR associated with this patch.

This patch addresses the following Remedy Tickets:

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1. HD374000 Inability to reverse TRICARE claims

2. HD374001 Incorrect Rx cost calculation for TRICARE claims

Overview of Remedy Tickets:

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1. HD374000 Inability to reverse TRICARE claims

Problem:

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VA Eastern Kansas HCS reported they are unable to reverse electronic

TRICARE claims through the ECME user screen. They are getting a message

stating: "The claim: ... is Tricare claim and cannot be Reversed."

Resolution:

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Remove the lines of code in routine BPSSCRRV that prevented this

functionality.

2. HD374001 Incorrect Rx cost calculation for TRICARE claims

Problem:

--------

VA Eastern Kansas HCS reported that the billing software is incorrectly

calculating the prescription cost for ECME claims in cases where the drug

is using the NCPDP QUANTITY MULTIPLIER field. The billing software is

calculating the cost based on the NCPDP quantity rather than the

dispensed quantity.

Resolution:

-----------

Correct the ECME utilities STARRAY^BPSNCPD1 and EN^BPSNCPD2 to NOT send

the NCPDP quantity to billing, but instead send the dispensed quantity to

billing as found in the prescription fill and refill data. Continue to

send the NCPDP quantity in the ECME ePharmacy transaction. Also, correct

the ECME utility IBSEND^BPSECMP2 to send the dispensed quantity to

billing as found in the prescription fill and refill data.

Components Sent With Patch

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The following is a list of files and fields included in this patch:

UP SEND DATA USER

DATE SEC. COMES OVER

FILE # FILE NAME DD CODE W/FILE RIDE

-------------------------------------------------------------------

9002313.02 BPS CLAIMS YES NO NO NO

Partial DD: subDD: 9002313.02 fld: .08

subDD: 9002313.0401fld: 443

9002313.57 BPS LOG OF TRANSACTIONS YES NO NO NO

Partial DD: subDD: 9002313.57 fld: 1204

fld: 1205

subDD: 9002313.5714

subDD: 9002313.57902fld: 902.28

fld: 902.29

fld: 902.3

fld: 902.31

fld: 902.32

fld: 902.33

9002313.59 BPS TRANSACTION YES NO NO NO

Partial DD: subDD: 9002313.59 fld: 1204

fld: 1205

subDD: 9002313.5914

subDD: 9002313.59902fld: 902.28

fld: 902.29

fld: 902.3

fld: 902.31

fld: 902.32

fld: 902.33

9002313.77 BPS REQUESTS YES NO NO NO

Partial DD: subDD: 9002313.77 fld: 1.08

fld: 1.09

fld: 1.1

fld: 1.11

fld: 1.12

subDD: 9002313.778

9002313.78 BPS INSURER DATA YES NO NO NO

Partial DD: subDD: 9002313.78 fld: 3.06

The following is a list of options included in this patch:

Option Name Distribution

----------- ------------

BPS COB MENU SEND TO SITE

BPS COB PROCESS SECOND TRICARE SEND TO SITE

BPS COB RPT SECONDARY CLAIMS SEND TO SITE

BPS COB RPT TRICARE CLAIMS SEND TO SITE

BPSMENU USE AS LINK FOR MENU ITEMS

Documentation Retrieval:

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Sites may retrieve documentation in one of the following ways:

1. The preferred method is to FTP the files from

REDACTED, which will transmit the files from the

first available FTP server.

2. Sites may also elect to retrieve documentation directly from a

specific server as follows:

Albany REDACTED

Hines REDACTED

Salt Lake City REDACTED

3. Documentation can also be retrieved from the VistA Documentation

Library (VDL) on the Internet at the following address,

http://www.va.gov/vdl.

The documentation distribution includes:

FILE NAME DESCRIPTION

---------------------------------------------------------------------

bps\_1\_p8\_rn.pdf ECME Release Notes

bps\_1\_p8\_um.pdf ECME User Manual

bps\_1\_p8\_tm.pdf ECME Technical Manual

Test Sites:

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REDACTED

================INSTALLATION INSTRUCTIONS =================

To avoid disruptions, these patches should be installed when users are

not on the system and during non-peak hours. Of particular concern would

be the items below.

1. Do not install the patch when ECME claims are being generated

by the BPS Nightly Background Job option [BPS NIGHTLY

BACKGROUND JOB]. Wait for this job to finish or complete the

installation before this job starts.

2. Do not install the patch when prescriptions are being

transmitted to CMOP. Wait for the CMOP transmission to finish

or complete the installation before the transmission starts.

Check with Pharmacy Service or your pharmacy Automated Data

Processing Application Coordinator (ADPAC) to find out when

CMOP transmissions occur.

Install Note: Because of the updating entries for the file (#9002313.91)

BPS NCPDP FIELD DEFS, during the install you will see the following

messages

Starting post-install of BPS\*1\*8

updating data for the NCPDP field# 337...

updating data for the NCPDP field# 338...

updating data for the NCPDP field# 339...

updating data for the NCPDP field# 340...

updating data for the NCPDP field# 341...

updating data for the NCPDP field# 342...

updating data for the NCPDP field# 431...

updating data for the NCPDP field# 443...

updating data for the NCPDP field# 471...

updating data for the NCPDP field# 472...

updating data for the NCPDP field# 412...

updating data for the NCPDP field# 477...

updating data for the NCPDP field# 481...

updating data for the NCPDP field# 483...

14 entries have been updated successfully

Install Time - Approximately less than 5 minutes

1. OBTAIN PATCHES

--------------

Obtain the host file BPS\_1\_8\_PSO\_IB.KID, which contains the following

three patch installs:

BPS\*1.0\*8

PSO\*7\*290

IB\*2.0\*411

Sites can retrieve VistA software from the following FTP addresses.

The preferred method is to FTP the files from:

REDACTED

This will transmit the files from the first available FTP server.

Sites may also elect to retrieve software directly from a specific

server as follows:

Albany REDACTED

Hines REDACTED

Salt Lake City REDACTED

The BPS\_1\_8\_PSO\_IB.KID host file is located in the anonymous.software

directory. Use ASCII Mode when downloading the file.

2. START UP KIDS

-------------

Start up the Kernel Installation and Distribution System Menu option

[XPD MAIN]:

Edits and Distribution ...

Utilities ...

Installation ...

Select Kernel Installation & Distribution System Option: INStallation

---

Load a Distribution

Print Transport Global

Compare Transport Global to Current System

Verify Checksums in Transport Global

Install Package(s)

Restart Install of Package(s)

Unload a Distribution

Backup a Transport Global

Select Installation Option:

3. LOAD TRANSPORT GLOBAL FOR MULTI-BUILD

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From the Installation menu, select the Load a Distribution option.

When prompted for "Enter a Host File:", enter the full directory path

where you saved the host file BPS\_1\_8\_PSO\_IB.KID (e.g.,

SYS$SYSDEVICE:[ANONYMOUS]BPS\_1\_8\_PSO\_IB.KID).

When prompted for "OK to continue with Load? NO//", enter "YES."

The following will display:

Loading Distribution...

BPS PSO IB BUNDLE 4.0

BPS\*1.0\*8

PSO\*7.0\*290

IB\*2.0\*411

Use INSTALL NAME: BPS PSO IB BUNDLE 4.0 to install this

Distribution.

7. RUN OPTIONAL INSTALLATION OPTIONS FOR MULTI-BUILD

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From the Installation menu, you may select to use the following

options (when prompted for the INSTALL NAME, enter

BPS PSO IB BUNDLE 4.0):

a. Backup a Transport Global - This option will create a backup

message of any routines exported with this patch. It will not

backup any other changes such as DD's or templates.

b. Compare Transport Global to Current System - This option will

allow you to view all changes that will be made when this patch

is installed. It compares all components of this patch

(routines, DD's, templates, etc.).

c. Verify Checksums in Transport Global - This option will allow

you to ensure the integrity of the routines that are in the

transport global.

8. INSTALL MULTI-BUILD

-------------------

This is the step to start the installation of this KIDS patch. This

will need to be run for the BPS PSO IB BUNDLE 4.0.

a. Choose the Install Package(s) option to start the patch

install.

b. When prompted for the "Select INSTALL NAME:", enter BPS PSO IB

BUNDLE 4.0.

c. For the BPS\*1\*8 patch, when prompted "Want KIDS to Rebuild Menu

Trees Upon Completion of Install? YES//" enter YES unless your

system does this in a nightly TaskMan process.

d. For the PSO\*7\*290 patch, when prompted "Want KIDS to Rebuild Menu

Trees Upon Completion of Install? YES//" enter YES unless your

system does this in a nightly TaskMan process.

e. For the IB\*2\*411 patch, when prompted "Want KIDS to Rebuild Menu

Trees Upon Completion of Install? YES//" enter YES unless your

system does this in a nightly TaskMan process.

f. When prompted "Want KIDS to INHIBIT LOGONs during the

install? YES//" enter NO.

g. When prompted "Want to DISABLE Scheduled Options, Menu Options,

and Protocols? YES//" enter YES.

h. When prompted "Enter options you wish to mark as 'Out Of

Order':" enter the following options:

Billing Clerk's Menu [IB BILLING CLERK MENU]

Billing Supervisor Menu ... [IB BILLING SUPERVISOR MENU]

Patient Insurance Menu ... [IBCN INSURANCE MGMT MENU]

e-Pharmacy Menu ... [IBCNR E-PHARMACY MENU]

ECME Billing Events Report option [IB ECME BILLING EVENTS]

ECME [BPSMENU]

ECME User Screen [BPS USER SCREEN]

Rx (Prescriptions) [PSO RX]

ePharmacy Menu [PSO EPHARMACY MENU]

Suspense Functions [PSO PND]

i. When prompted "Enter protocols you wish to mark as 'Out Of

Order':" enter <return>.

j. When prompted "Delay Install (Minutes): (0-60): 0//" enter an

appropriate number of minutes to delay the installation in

order to give users enough time to exit the disabled options

before the installation starts.

k. When prompted "Device: Home//" respond with the correct device.

The second line of each of the following routines now looks like:

;;1.0;E CLAIMS MGMT ENGINE;\*\*[Patch List]\*\*;JUN 2004;Build 29

Routine Information:

====================

The checksums below are new checksums, and

can be checked with CHECK1^XTSUMBLD.

Routine Name: BPS10P8

Before: n/a After: B14241991 \*\*8\*\*

Routine Name: BPSBCKJ

Before: B46863482 After: B49753700 \*\*1,2,5,7,8\*\*

Routine Name: BPSBUTL

Before: B52438241 After: B54102124 \*\*1,3,2,5,7,8\*\*

Routine Name: BPSECA1

Before: B9994271 After: B12154283 \*\*1,5,8\*\*

Routine Name: BPSECMP2

Before: B65381768 After: B81277814 \*\*1,5,6,7,8\*\*

Routine Name: BPSECX0

Before: B4171802 After: B23106196 \*\*1,5,8\*\*

Routine Name: BPSFLD01

Before: n/a After: B9727334 \*\*8\*\*

Routine Name: BPSNCPD1

Before: B46831868 After: B44878746 \*\*1,3,5,6,7,8\*\*

Routine Name: BPSNCPD2

Before: B37810791 After: B42415694 \*\*1,5,6,7,8\*\*

Routine Name: BPSNCPD3

Before: B28795294 After: B28796956 \*\*1,5,6,7,8\*\*

Routine Name: BPSNCPD4

Before: B40771134 After: B43623914 \*\*6,7,8\*\*

Routine Name: BPSNCPD5

Before: B64980990 After: B78805427 \*\*7,8\*\*

Routine Name: BPSNCPD6

Before: B36903046 After: B39101412 \*\*7,8\*\*

Routine Name: BPSNCPDP

Before: B54845917 After: B76105402 \*\*1,3,4,2,5,6,7,8\*\*

Routine Name: BPSOS6M

Before: B10068430 After: B11551065 \*\*1,5,8\*\*

Routine Name: BPSOSC2

Before: B29561871 After: B34066005 \*\*1,5,8\*\*

Routine Name: BPSOSCC

Before: B24314564 After: B26147652 \*\*1,2,5,8\*\*

Routine Name: BPSOSCD

Before: B38794587 After: B50726570 \*\*1,3,2,5,7,8\*\*

Routine Name: BPSOSCE

Before: B13508896 After: B14075186 \*\*1,5,7,8\*\*

Routine Name: BPSOSCF

Before: B26940349 After: B28717442 \*\*1,5,8\*\*

Routine Name: BPSOSH2

Before: B26441893 After: B63139845 \*\*1,5,8\*\*

Routine Name: BPSOSHF

Before: B11141582 After: B32080446 \*\*1,5,8\*\*

Routine Name: BPSOSIY

Before: B55797518 After: B67267504 \*\*1,3,5,6,7,8\*\*

Routine Name: BPSOSIZ

Before: B14362353 After: B16026755 \*\*1,5,7,8\*\*

Routine Name: BPSOSQA

Before: B8495270 After: B9957067 \*\*1,5,7,8\*\*

Routine Name: BPSOSRB

Before: B38286741 After: B41392879 \*\*1,5,7,8\*\*

Routine Name: BPSOSRX

Before: B40176170 After: B41387461 \*\*1,5,7,8\*\*

Routine Name: BPSOSRX2

Before: B19493151 After: B20068937 \*\*7,8\*\*

Routine Name: BPSOSRX3

Before: B60624911 After:B105355282 \*\*7,8\*\*

Routine Name: BPSOSRX4

Before: B38901734 After: B55754369 \*\*7,8\*\*

Routine Name: BPSOSRX5

Before: B30558901 After: B36392851 \*\*7,8\*\*

Routine Name: BPSOSRX6

Before: B25462490 After: B25512407 \*\*7,8\*\*

Routine Name: BPSPRRX

Before: n/a After: B99076770 \*\*8\*\*

Routine Name: BPSPRRX1

Before: n/a After: B12437232 \*\*8\*\*

Routine Name: BPSPRRX2

Before: n/a After: B8324629 \*\*8\*\*

Routine Name: BPSPRRX3

Before: n/a After: B99615569 \*\*8\*\*

Routine Name: BPSPRRX4

Before: n/a After: B15420214 \*\*8\*\*

Routine Name: BPSPRRX5

Before: n/a After: B48156542 \*\*8\*\*

Routine Name: BPSPRRX6

Before: n/a After: B57663596 \*\*8\*\*

Routine Name: BPSRES

Before: B66886236 After: B93916400 \*\*3,5,7,8\*\*

Routine Name: BPSRPT1

Before: B52062138 After: B52995272 \*\*1,5,7,8\*\*

Routine Name: BPSRPT4

Before: B67405446 After: B69467414 \*\*1,5,7,8\*\*

Routine Name: BPSRPT5

Before: B72711123 After: B79661218 \*\*1,3,5,7,8\*\*

Routine Name: BPSRPT6

Before: B59574231 After: B66218478 \*\*1,3,5,7,8\*\*

Routine Name: BPSRPT7

Before: B77006502 After: B77430067 \*\*1,3,5,7,8\*\*

Routine Name: BPSRPT8

Before: B78632943 After: B84250810 \*\*1,3,5,7,8\*\*

Routine Name: BPSRPT9

Before: n/a After: B81558879 \*\*8\*\*

Routine Name: BPSRPT9A

Before: n/a After: B71706588 \*\*8\*\*

Routine Name: BPSSCR03

Before: B48894943 After: B42145046 \*\*1,5,7,8\*\*

Routine Name: BPSSCRCL

Before: B65041094 After: B76318080 \*\*1,3,5,7,8\*\*

Routine Name: BPSSCRLG

Before: B95335082 After: B97729982 \*\*1,5,7,8\*\*

Routine Name: BPSSCRRS

Before: B34449344 After: B44067784 \*\*1,3,5,7,8\*\*

Routine Name: BPSSCRRV

Before: B37049932 After: B40545723 \*\*1,5,6,7,8\*\*

Routine Name: BPSSCRU3

Before: B30240821 After: B30637579 \*\*1,5,7,8\*\*

Routine Name: BPSSCRU5

Before: B61189921 After: B62214356 \*\*1,5,7,8\*\*

Routine Name: BPSSCRU6

Before: B5405845 After: B18199575 \*\*3,8\*\*

Routine Name: BPSTEST

Before: B58349994 After: B68950406 \*\*6,7,8\*\*

Routine Name: BPSUTIL2

Before: B11085686 After: B26258660 \*\*7,8\*\*

Routine Name: BPSWRKLS

Before: B27286584 After: B31684663 \*\*7,8\*\*

Routine list of preceding patches: 7

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User Information:

Entered By : REDACTED Date Entered : OCT 25,2007

Completed By: REDACTED Date Completed: SEP 1,2010

Released By : Date Released :

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# Enhancements

## Technical Modifications

### 3.1.1 ECME Engine

The modifications made in this patch allow:

* The engine to recognize secondary claims and process additional Coordination of Benefits (COB) fields specific for secondary claims
* The engine to use specific plans and rate types selected by the user
* The collection of specific data for secondary claims that is stored in the BPS TRANSACTION, BPS CLAIMS OF TRANSACTION, and BPS REQUESTS files
* The collection of specific data for secondary claims so they can be processed, formatted, and included in HL7 messages sent to the payer
* The entries in the file (#9002313.91) BPS NCPDP FIELD DEFS to be updated by the post-install routine to allow the software to process the additional COB fields and transmit them to the secondary payer in the correct format
* The COB Indicator information to be returned in the EN^BPSNCPDP API
* The ECME to send reject codes to Outpatient Pharmacy along with the COB indicator so the Pharmacy software can distinguish reject codes returned by secondary and primary payers
* The new routine BPSFLD01, created to store GET, SET, and FORMAT code, to support processing of the COB fields transmitted to the secondary payers
* The claim status code, which has been adjusted, to provide correct status information for secondary and primary claims
* The modified API DURI^BPSNCPD3 (ICR#4560 to allow the calling application to specify the COB (payer sequence) indicator of the claim for which it is called and to implement a new format of the array for returned values
* The modified testing tool to process secondary claims

### 3.1.2 ECME User Screen Modifications

The ECME User Screen modifications allow the display of COB (payer sequence) indicators:

* The Main Display Screen and Further Research Screen modifications distinguish between primary and secondary claims displayed on the screen. Each status line is supplied with the COB indicators “p” for primary claims and “s” for secondary claims. Status of another claim associated with the same prescription/refill (if any) is displayed in parentheses:
  + 9.1 ACETAMINOPHEN 650 12345-4321-22 03/02 102287 1/0113558 W RT DIS/NR p-Reversal accepted
  + 9.2 MEDROXYPROGESTRON 00009-0050-02 02/11 102289 0/0113560 W RT ACT/RL s-Payable (p-Payable)
* The Print Claim Log screen displays a new label to indicate the COB insurance level:
  + Rx Coordination of Benefits: PRIMARY
* The initial page of the developer log was updated to display the information for the specific claim line selected:
  + Insurance: COB INSURANCE
  + RX Coord of Benefits: PRIMARY

The subsequent pages are based upon the prescription and fill and are not able to differentiate between insurances. However, a log entry indicating the COB level will be added each time the prescription and fill is processed:

* BPSOSRB-Secondary Insurance
* BPSOSQA-Secondary Insurance

### 3.1.3 Reversing Claims

The primary claim cannot be reversed if there is a payable secondary claim. In such a case the user will be advised to reverse the secondary claim first.

* 1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT ACT/RL cannot be Reversed if the secondary claim is payable. Please reverse the secondary claim first

### 3.1.4 Resubmit Claims and Resubmit Claims w/EDITS (RED) Functionality

The primary claim cannot be resubmitted if there is a payable secondary claim. In such a case the user shall be advised to reverse the secondary claim first.

* 1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT ACT/RL Are you sure? (Y/N)? y YES

The claim:

* 1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT ACT/RL cannot be Resubmitted if the secondary claim is payable.

Please reverse the secondary claim first

### 3.1.5 Send to Worklist Functionality

The ECME software was modified to:

* Allow secondary claims to be sent to the Pharmacy Worklist manually from the User Screen
* Send Refill Too Soon and DUR rejects for secondary claims to the Pharmacy Worklist automatically

### 3.1.6 ECME Claims Results Report

The ECME Claims Result reports (Payable Claims Report [BPS RPT PAYABLE], Rejected Claims Report [BPS RPT REJECTION], Reversal Claims Report [BPS RPT REVERSAL], Claims Submitted, Not Yet Released [BPS RPT NOT RELEASED], Recent Transactions [BPS RPT RECENT TRANSACTIONS], and Closed Claims Report [BPS RPT CLOSED CLAIMS]) were modified to display the COB indicators. The Excel format of the reports include the COB indicator of the submitted claims as a new piece of data in the data string.

### 3.1.7 ECME Claims-Response Inquiry [BPS RPT CLAIMS RESPONSE] Report

The report reflects new COB data sent in secondary claims.

### 3.1.8 ECME Potential Secondary Rx Claims Report [BPS COB RPT SECONDARY CLAIMS]

This new report returns all primary prescription claims, whether processed electronically or on paper, that have possible secondary insurance identified in the patient insurance file.

### 3.1.9 Potential TRICARE Rx Claims Report [BPS COB RPT TRICARE CLAIMS]

This new report returns prescriptions that have not yet been billed for any patient who has an active insurance plan with a type of plan = TRICARE and who has a dual eligibility (veteran and TRICARE) and whose prescription Rx Patient Status is not exempt for Champus Billing. This report also includes prescriptions for patients who have TRICARE only in case the system is not available and the prescription cannot be processed automatically by ECME.

### 3.1.10 Process Secondary/TRICARE Rx to ECME [BPS COB PROCESS SECOND TRICARE]

The new option was introduced to process the claims identified on the new reports. This option will submit the claim to ECME and also can be used to resubmit the claim when the user needs to change data specific for secondary claims. Any other processing on this claim can be done through the existing actions available on the ECME User Screen.

When processing a claim using a specific prescription number, the users will need to select the fill number from the list provided by software to generate a claim. The user will be required to enter the billing rate type since there are 2 types of claims that will primarily be using this option. Reimbursable Insurance and TRICARE (including TRICARE Reimbursable Insurance) are the only types of Billing Rates that will be allowed at this time.

When processing the secondary claim, the users will be presented with the secondary claim data and will be prompted to edit this data if necessary. Secondary claim data elements include:

* Other Coverage Code
* Other Payer Coverage Type
* Other Payer ID Qualifier
* Other Payer ID
* Other Payer Date

If the primary payer paid the primary claim:

* Other Payer Amount Paid Qualifier (mult)
* Other Payer Amount Paid (mult)

If the primary payer rejected the primary claim:

* Other Payer Reject Codes (mult)

This option can also be used to resubmit secondary claims when the user needs to edit the specific secondary claims information submitted previously. The user will be prompted for the same information and this time the default values for the prompts will be set to data submitted in the latest transaction. In addition during resubmission the user can change the secondary payer and the rate type if needed. The resubmission is allowed only for rejected or reversed secondary claims. The payable claims need to be reversed in the User Screen before they can be resubmitted through this menu option.

This option also allows the user to submit and resubmit primary claims for prescriptions/refills for TRICARE patients and patients with dual eligibility. When processing primary claims the users will be prompted to select a primary payer for the e-claim and the rate type. The software allows the user to resubmit the existing primary claims and change the payer and/or the rate type if needed. The resubmission is allowed only for rejected or reversed claims. The payable claims need to be reversed in the User Screen before they can be resubmitted through this menu option.

### 3.1.11 COB Indicators for Pharmacy Activity Log Entries

ECME code has been modified to add COB indicators to Pharmacy Activity log when the claim is submitted via User Screen actions “Resubmit Claim” and “Resubmit Claim w/EDITS” and also when it is reversed manually via “Reverse Payable Claim” action or automatically by ECME nightly processing job (auto reversals).

## Issue Resolutions

There were no New Service Requests (NSRs) for this patch. This patch does address the following Remedy Tickets associated with this patch:

1. HD374000 Inability to reverse TRICARE claims.
2. HD374001 Incorrect Rx cost calculation for TRICARE claims.

### 3.2.1 HD374000 Inability to Reverse TRICARE Claims

**Problem:** VA Eastern Kansas HCS reported they are unable to reverse electronic TRICARE claims through the ECME user screen. They are getting a message stating: “The claim: ... is TRICARE claim and cannot be Reversed.”

**Resolution:** Remove the lines of code in routine BPSSCRRV that prevented this functionality.

### 3.2.2 HD374001 Incorrect Rx Cost Calculation for TRICARE Claims

**Problem:** VA Eastern Kansas HCS reported that the billing software is incorrectly calculating the prescription cost for ECME claims in cases where the drug is using the NCPDP QUANTITY MULTIPLIER field. The billing software is calculating the cost based on the NCPDP quantity rather than the dispensed quantity.

**Resolution:** Correct the ECME utilities STARRAY^BPSNCPD1 and EN^BPSNCPD2 to NOT send the NCPDP quantity to billing, but instead send the dispensed quantity to billing as found in the prescription fill and refill data. Continue to send the NCPDP quantity in the ECME ePharmacy transaction. Also, correct the ECME utility IBSEND^BPSECMP2 to send the dispensed quantity to billing as found in the prescription fill and refill data.