## 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.

<table>
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<th>Patch Number</th>
<th>Description</th>
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<td>11/2013</td>
<td>Cover, i-vi, 37, 38a, 45a, 46, 61, 85</td>
<td>PSO<em>7</em>421</td>
<td>Updated contents to reflect added/removed functionality of current patch. Updated front material. 37, 45a, 46 - Added Reject Resolution Required information, 38a - Added Example for handling Reject Required Rejected. 61 - Added if claim submission returns a Reject Resolution Required information, 85 - Added Reject Resolution Required reject to index.</td>
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<tr>
<td>05/2013</td>
<td>i, ii, vi, 24, 68-68d, 75-75d, 77-78, 85</td>
<td>PSO<em>7</em>391</td>
<td>Updated Table of Contents. New sort selection for CS. New security key named &quot;PSDRPH&quot; introduced. Added Hash Counts and DEA Certification section. Added two System Error messages. Updated Index.</td>
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<td>01/2013</td>
<td>i-ii, v-ii 8, 4, 6, 22, 23, 26n, 28, 29b, 29v, 36, 52, 55, 56, 18a-18d, 26-26e2, 27, 48, 55a, 29f-29g2, 79-84, 85</td>
<td>PSO<em>7</em>390</td>
<td>Updated Revision History &amp; Table of Contents. Added new option Check Interaction. Added Creatinine Clearance (CrCl) and Body Surface Area (BSA), when available, to the header area of Patient and Medication Profile displays. Added new option Check Drug Interaction. Added information regarding clinic orders. Update Hidden Actions. Added drug allergy changes. Update Glossary. Update Index.</td>
</tr>
<tr>
<td>09/2012</td>
<td>i, ii, vi, 55a – 55d</td>
<td>PSO<em>7</em>386</td>
<td>Added section on HOLD and UNHOLD functionality. (N.Goyal, PM; J.Owczarzak, Tech Writer)</td>
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<tr>
<td>02/2012</td>
<td>i-ii, v-vi, 14, 34, 37-40, 42-43, 45a-45h, 63, 66, 68a-b, 70, 79-83</td>
<td>PSO<em>7</em>385, PSO<em>7</em>359</td>
<td>Added signature alert. Expanded ECME Numbers to twelve digits. Corrected typos. Updated wording on p. 34 from “a message” to “messages.”</td>
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<td>Date</td>
<td>Revised Pages</td>
<td>Patch Number</td>
<td>Description</td>
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<tr>
<td>04/2011</td>
<td>i, v, vi</td>
<td>PSO<em>7</em>251</td>
<td>The following changes are included in this patch:</td>
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<td></td>
<td>4</td>
<td></td>
<td>- Updated Revision History</td>
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<td>- Updated Table of Contents</td>
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<td>- Outpatient List Manager Screen Views</td>
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<tr>
<td></td>
<td>21</td>
<td></td>
<td>- Added HP and H to Hold Status, and Added DF, DE, DP, DD and DA</td>
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<td></td>
<td>22</td>
<td></td>
<td>- Added Intervention menu hidden action information</td>
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<td></td>
<td>24</td>
<td></td>
<td>- Added DF, DE, DP, DD and DA, and Added HP and H to Hold Status</td>
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<tr>
<td></td>
<td>25-26r</td>
<td></td>
<td>- Replaced Medication Short Profile</td>
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<td></td>
<td>27</td>
<td></td>
<td>-Inserted enhanced Order checks, Outpatient Pharmacy generated order checks</td>
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<tr>
<td></td>
<td>28-28b</td>
<td></td>
<td>- Added IN to Screen Scrape</td>
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<tr>
<td></td>
<td>29-29ff</td>
<td></td>
<td>- Modified New Order Screen Scrape</td>
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<tr>
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<td>50</td>
<td></td>
<td>- Updated Entering a New Order, Added Allergy/ADR, Therapeutic Duplication, and CPRS Order Checks</td>
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<tr>
<td></td>
<td>54</td>
<td></td>
<td>- Duplicate Drug examples</td>
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<td></td>
<td>75</td>
<td></td>
<td>- Duplicate Drug examples</td>
</tr>
<tr>
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<td>77-78</td>
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<td>- CPRS Order Checks – How They Work</td>
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<td>79-84</td>
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<td>85</td>
<td></td>
<td>- Updated Index to include Enhanced Drug-Drug Interactions, Duplicate Drug Order Check, Allergy/ADR Order Check Display, Therapeutic Duplication, and CPRS Order Checks, and updated page numbering</td>
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<tr>
<td>10/09</td>
<td>v, 11, 21-23, 61, 81</td>
<td>PSO<em>7</em>326</td>
<td>The Social Security Number was removed from print outs given to patients. The patient lookup has been expanded to include the ability to look up by prescription number or wand a barcode with the prescription from many options. (E. Wright, PM; S. B. Gilbert, Tech Writer)</td>
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<tr>
<td>08/09</td>
<td>All</td>
<td>PSO<em>7</em>320</td>
<td>The following changes are included in this patch.</td>
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<tr>
<td></td>
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<td>- Remote Data prompt, notification, and screen have</td>
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<tr>
<td>Date</td>
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<td>Patch Number</td>
<td>Description</td>
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<td>been added.</td>
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</table>
|        |               |              | • A hidden action, DR [Display Remote], has been added.
|        |               |              | • "THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES" prints at the end of the Pull Early from Suspense report. |
|        |               |              | (G. Tucker, PM; S. B. Scudder, Tech Writer) |
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.
# Table of Contents

- NDC Validation ............................................................................................................................. 46
- Chapter 9: Pull Early from Suspense ............................................................................................ 61
  - Pull Early from Suspense ........................................................................................................... 61
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If a new order is rejected due to a Drug Utilization Review (DUR), Reject Resolution Required, 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 displays 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                      NCPDP: 123456789 NPI#: 39393939
Patient  : OPPATIENT,FOUR(000-01-1322P)  Sex: M      DOB: JAN 13,1922(83)
Prescription : 99999999/0 - TESTOSTERONE (ANDROD   ECME#: 000001234567
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                          Contact: 800 555-5555
Group Name   : RXINS                      Group Number: 12454
Cardholder ID: 000011322P
----------------------------------------------------------------------

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 Reject Resolution Required rejected New Prescription for ePharmacy Billing

For VETERAN prescriptions, a reject code can be specified in the Reject Resolution Required section of the ePharmacy Site Parameter screen to stop a prescription from being filled. The Reject Resolution Required reject codes will prevent a prescription from being filled during any claims processing under the following conditions:

- VETERAN eligibility
- The prescription is an original fill
- The prescription is not released
- The reject is on the Reject Resolution Required list for the division
- The total gross amount of the prescription is at or above the specified threshold amount

For VETERAN prescription rejections that have Reject Resolution Required rejects, the user will be able to select from (I)gnore, which bypasses claims processing and allows the prescription to be filled, or (Q)uit which sends it to the Third Party Payer Rejects – Worklist. Prescriptions with these type rejects cannot be filled until the reject is resolved. Example:

Example: Handling a Reject Resolution Required rejected New Order for ePharmacy Billing (continued)

Claim Status:
IN PROGRESS - Waiting to start
IN PROGRESS - Building the claim
IN PROGRESS - Building the HL7 packet
IN PROGRESS - Transmitting
IN PROGRESS - Processing response
E REJECTED

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

Division: ALBANY                NPI: 123456789       NCPDP: 4150001
Patient: OP,FOUR(000-01-1322P)  Sex: M      DOB: JAN 13, 1922(83)
Rx/Drug: 99999999/0 - TESTOSTERONE (ANDROD       ECME#: 000001234567
Reject(s): 76 - Plan Limitations Exceeded     Received on JUN 07, 2013@11:26:05

Payer Message: DAYS SUPPLY IS MORE THAN ALLOWED BY PLAN
             Insurance: TEST INS                          Contact: 800-555-5555
             Group Name: RXINS                          Group Number: 12454
             Cardholder ID: 0000011322P

Reject Resolution Required
Gross Amount Due ($34.42) is greater than or equal to
Threshold Dollar Amount ($0)
Please select Quit to resolve this reject on the Reject Worklist.

Select one of the following:

I (I)gnore - Fill Rx WITHOUT CLAIM SUBMISSION
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(I)gnore,(Q)uit: Q/
Example: Handling a CHAMPVA Rejected New Order for ePharmacy Billing

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

CHAMPVA Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED

79 - Refill Too Soon
14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR CHAMPVA PATIENT ***
-------------------------------------------------------------------------
Division : ALBANY ISC                 NPI#: 5000000021   NCPDP:1234567
Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.          ECME#: 000000112303
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
Received on MAR 03, 2008@14:40:57.
Insurance    : CHAMPVA                         Contact:
Group Name   : CHAMPVA PRIME              Group Number: 123123
Cardholder ID: SI9844532
-------------------------------------------------------------------------
Select one of the following:
O         (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
D         (D)iscontinue - DO NOT FILL PRESCRIPTION
Q         (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O) override, (D) iscontinue, (Q) quit: Q//
NDC Validation

The initial validation of the NDC can be performed by a pharmacy technician. This functionality only applies to local fills that are not sent to OPAI. This function provides a pharmacy technician the ability to manually enter or scan the bar code of the existing prescription label and then manually enter or scan the NDC of the stock bottle used to fill the prescription. When the system matches the NDC, confirmation is provided to the pharmacy tech and allows the technician to continue processing. However, if the system detects a mismatch and the NDC of the stock bottle has an associated entry in the synonym file, the NDC will be updated in Prescription file (#52) for the fill. The system will then prompt the technician to press enter to continue, a new label will be printed, the original electronic claim reversed, and a new claim submission will be transmitted with the new NDC. In the event that the revised NDC prompts a RTS/DUR rejection or a Reject Resolution Required rejection, the system will immediately send the item to the Reject Worklist.

In a case where the NDC entered is not defined for the drug, the system prompts the technician that a mismatch has occurred and the prescription needs to be validated by a pharmacist. The system notes that the NDC had not been validated and allows the pharmacy tech to move to the next prescription. In the event of a change of NDC prompting a rejection, the system immediately sends the item to the Reject Worklist.

The releasing pharmacist will receive a notation that NDC has been validated by the technician when processing. If the NDC change has prompted a claim reversal and produced a RTS/DUR rejection or a Reject Resolution Required rejection, the pharmacist will be presented with a Reject Processing screen at release.

Example: Matched NDC:

```
select ePharmacy Menu Option: NV  NDC Validation
WAND BARCODE or enter Rx#: 2054787B
Rx: 2054787B        Fill: 0             Patient: OPPATIENT,TWO
Drug: AMOXICILLIN 250MG CAP             NDC: 00003-0101-60
** This NDC has not been validated.
PRODUCT NDC: 00003-0101-60// 00003-0101-60
NDC match confirmed.
WAND BARCODE or enter Rx#: 2054787B
```
Chapter 1: 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 the patient has remote prescriptions, then the text “THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES” will appear on the report as shown in the following example.

<table>
<thead>
<tr>
<th>PRESCRIPTION PROFILE AS OF 12/30/2008</th>
</tr>
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<tbody>
<tr>
<td>NAME: PSOPATIENT,ONE</td>
</tr>
<tr>
<td>ID#: 000-00-0000</td>
</tr>
<tr>
<td>THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES</td>
</tr>
<tr>
<td>PHARMACIST: __________________ DATE: ________</td>
</tr>
</tbody>
</table>

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), Reject Resolution Required 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. If the claim submission returns a Reject Resolution Required reject, the label is not printed for the prescription and it is moved to the Reject Resolution Required section of the Third Party Payer Reject Worklist.
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<td>Reject Resolution Required reject, 38a</td>
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