Medical Care Collection Fund (MCCF) Electronic Data Interchange (EDI) Transaction Applications Suite (TAS) ePharmacy Build 3 & 4

Electronic Claims Management Engine BPS*1.0*23
Outpatient Pharmacy PSO*7.0*482
Integrated Billing IB*2.0*591

Deployment, Installation, Back-Out, and Rollback Guide

Version 1.0

August 2018
Department of Veterans Affairs
Office of Information and Technology (OI&T)
Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Version</th>
<th>Description</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 2018</td>
<td>1.0</td>
<td>Initial Version</td>
<td>Mark Dawson</td>
</tr>
</tbody>
</table>

Artifact Rationale

This document describes the Deployment, Installation, Back-out, and Rollback Plan for new products going into the VA Enterprise. The plan includes information about system support, issue tracking, escalation processes, and roles and responsibilities involved in all those activities. Its purpose is to provide clients, stakeholders, and support personnel with a smooth transition to the new product or software, and should be structured appropriately, to reflect particulars of these procedures at a single or at multiple locations.

Per the Veteran-focused Integrated Process (VIP) Guide, the Deployment, Installation, Back-out, and Rollback Plan is required to be completed prior to Critical Decision Point #2 (CD #2), with the expectation that it will be updated throughout the lifecycle of the project for each build, as needed.
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1 Introduction

This document describes how to deploy and install the multi-build BPS IB PSO BUNDLE 11.0 (which includes BPS*1.0*23, IB*2.0*591, PSO*7.0*482) and how to back-out the product and rollback to a previous version or data set.

1.1 Purpose

The purpose of this plan is to provide a single, common document that describes how, when, where, and to whom the multi-build BPS IB PSO BUNDLE 11.0 (which includes BPS*1.0*23, IB*2.0*591, PSO*7.0*482) will be deployed and installed, as well as how it is to be backed out and rolled back, if necessary. The plan identifies resources, communications plan, and rollout schedule. Specific instructions for installation, back-out, and rollback are included in this document.

1.2 Dependencies

BPS*1.0*21 and BPS*1.0*22 must be installed BEFORE BPS*1*23.
IB*2.0*568 must be installed BEFORE IB*2.0*591.
PSO*7.0*318, PSO*7.0*409, PSO*7.0*454, PSO*7.0*459, PSO*7.0*500, PSO*7.0*509, and PSO*7.0*513 must be installed BEFORE PSO*7*482.

1.3 Constraints

This patch is intended for a fully patched VistA system.

2 Roles and Responsibilities

Table 1: Deployment, Installation, Back-out, and Rollback Roles and Responsibilities

<table>
<thead>
<tr>
<th>ID</th>
<th>Team</th>
<th>Phase / Role</th>
<th>Tasks</th>
<th>Project Phase (See Schedule)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>VA OI&amp;T, VA OI&amp;T Health Product Support, and PMO (Leidos)</td>
<td>Deployment</td>
<td>Plan and schedule deployment (including orchestration with vendors)</td>
<td>Planning</td>
</tr>
<tr>
<td>2</td>
<td>Local VAMC and CPAC processes</td>
<td>Deployment</td>
<td>Determine and document the roles and responsibilities of those involved in the deployment.</td>
<td>Planning</td>
</tr>
<tr>
<td>3</td>
<td>Field Testing (Initial Operating Capability - IOC), Health Product Support Testing &amp; VIP Release Agent Approval</td>
<td>Deployment</td>
<td>Test for operational readiness</td>
<td>Testing</td>
</tr>
<tr>
<td>ID</td>
<td>Team</td>
<td>Phase / Role</td>
<td>Tasks</td>
<td>Project Phase (See Schedule)</td>
</tr>
<tr>
<td>----</td>
<td>----------------------------------------------------------------------</td>
<td>--------------</td>
<td>----------------------------------------------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>4</td>
<td>Health product Support and Field Operations</td>
<td>Deployment</td>
<td>Execute deployment</td>
<td>Deployment</td>
</tr>
<tr>
<td>5</td>
<td>Individual Veterans Administration Medical Centers (VAMCs)</td>
<td>Installation</td>
<td>Plan and schedule installation</td>
<td>Deployment</td>
</tr>
<tr>
<td>6</td>
<td>VIP Release Agent</td>
<td>Installation</td>
<td>Ensure authority to operate and that certificate authority security documentation is in place</td>
<td>Deployment</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td>Installation</td>
<td>Validate through facility POC to ensure that IT equipment has been accepted using asset inventory processes</td>
<td>N/A; only existing VistA system will be used</td>
</tr>
<tr>
<td>8</td>
<td>VA's eBusiness team</td>
<td>Installations</td>
<td>Coordinate training</td>
<td>Deployment</td>
</tr>
<tr>
<td>9</td>
<td>VIP release Agent, Health Product Support &amp; the development team</td>
<td>Back-out</td>
<td>Confirm availability of back-out instructions and back-out strategy (what are the criteria that trigger a back-out)</td>
<td>Deployment</td>
</tr>
<tr>
<td>10</td>
<td>VA OI&amp;T, VA OI&amp;T Health Product Support, and MCCF EDI TAS Development Team (Halfaker)</td>
<td>Post Deployment</td>
<td>Hardware, Software and System Support</td>
<td>Warranty</td>
</tr>
</tbody>
</table>

### 3 Deployment

The deployment is planned as a national rollout.

This section provides the schedule and milestones for the deployment.

#### 3.1 Timeline

The duration of deployment and installation is 30 days, as depicted in the master deployment schedule\(^1\).

---

\(^1\) Project schedule (right click and select open hyperlink to access)  
3.2 Site Readiness Assessment

This section discusses the locations that will receive the deployment of the multi-build BPS IB PSO BUNDLE 11.0 (which includes BPS*1.0*23, IB*2.0*591, PSO*7.0*482).

3.2.1 Deployment Topology (Targeted Architecture)

This multi-build BPS IB PSO BUNDLE 11.0 (which includes BPS*1.0*23, IB*2.0*591, PSO*7.0*482) is to be nationally released to all VAMCs.

3.2.2 Site Information (Locations, Deployment Recipients)

The IOC sites are:
- Birmingham
- Eastern Kansas
- Lexington
- Little Rock
- Richmond

Upon national release all VAMCs are expected to install this patch prior to or on the compliance date.

3.2.3 Site Preparation

The following table describes preparation required by the site prior to deployment.

### Table 2: Site Preparation

<table>
<thead>
<tr>
<th>Site/Other</th>
<th>Problem/Change Needed</th>
<th>Features to Adapt/Modify to New Product</th>
<th>Actions/Steps</th>
<th>Owner</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

3.3 Resources

3.3.1 Facility Specifics

The following table lists facility-specific features required for deployment.

### Table 3: Facility-Specific Features

<table>
<thead>
<tr>
<th>Site</th>
<th>Space/Room</th>
<th>Features Needed</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

3.3.2 Hardware

The following table describes hardware specifications required at each site prior to deployment.
### 3.3.3 Software

The following table describes software specifications required at each site prior to deployment.

#### Table 5: Software Specifications

<table>
<thead>
<tr>
<th>Required Software</th>
<th>Make</th>
<th>Version</th>
<th>Configuration</th>
<th>Manufacturer</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fully patched Electronic Claims Management Engine package within VistA</td>
<td>N/A</td>
<td>1.0</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Fully patched Integrated Billing package within VistA</td>
<td>N/A</td>
<td>2.0</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Fully patched Outpatient Pharmacy package within VistA</td>
<td>N/A</td>
<td>7.0</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Prerequisite patches in BPS, IB, PSO listed in section 1.2 above</td>
<td>N/A</td>
<td>Nationally released version</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Please see the Roles and Responsibilities table in Section 2 above for details about who is responsible for preparing the site to meet these software specifications.

### 3.3.4 Communications

The sites that are participating in field testing (IOC) will use the “Patch Tracking” message in Outlook to communicate with the ePharmacy eBusiness team, the developers, and product support personnel.

#### 3.3.4.1 Deployment/Installation/Back-Out Checklist

The Release Management team will deploy the multi-build BPS IB PSO BUNDLE 11.0, which is tracked nationally for all VAMCs in the National Patch Module (NPM) in Forum. Forum automatically tracks the patches as they are installed in the different VAMC production systems. One can run a report in Forum to identify when and by whom the patch was installed into the VistA production at each site. A report can also be run to identify which sites have not currently installed the patch into their VistA production system. Therefore, this information does not need to be manually tracked in the chart below.
4 Installation

4.1 Pre-installation and System Requirements
Multi-build BPS IB PSO BUNDLE 11.0 is installable on a fully patched M(UMPS) VistA system and operates on the top of the VistA environment provided by the VistA infrastructure packages. The latter provides utilities which communicate with the underlying operating system and hardware, thereby providing each VistA package independence from variations in hardware and operating system.

4.2 Platform Installation and Preparation
Refer to the BPS*1.0*23 documentation on the NPM in Forum for the detailed installation instructions. These instructions include any pre-installation steps if applicable.

4.3 Download and Extract Files
Refer to the BPS*1.0*23, IB*2.0*591, PSO*7.0*482 documentation on the NPM to find related documentation that can be downloaded. The patch description of each patch will be transmitted as a MailMan message from the NPM. These messages can also be pulled from the NPM. The patches themselves are bundled together into the multi-build BPS IB PSO BUNDLE 11.0. The host file containing these patches must be downloaded separately. The file name is BPS_1_23_IB_PSO.KID and it can be found on the ANONYMOUS.SOFTWARE directory on any of the VistA SFTP servers (Hines, Salt Lake City).

4.4 Database Creation
Multi-build BPS IB PSO BUNDLE 11.0 modifies the VistA database. All changes can be found on the NPM documentation for this patch.

4.5 Installation Scripts
No installation scripts are needed for multi-build BPS IB PSO BUNDLE 11.0 installation.

4.6 Cron Scripts
No Cron scripts are needed for multi-build BPS IB PSO BUNDLE 11.0 installation.

| Table 6: Deployment/Installation/Back-Out Checklist |
|-----------------------------|-----------------|-----------------|-----------------------------|
| Activity   | Day   | Time   | Individual who completed task |
| Deploy     | N/A   | N/A    | N/A                        |
| Install    | N/A   | N/A    | N/A                        |
4.7 Access Requirements and Skills Needed for the Installation

Staff performing the installation of this multi-build will need access to FORUM’s NPM to view all patch descriptions. Staff will also need access and ability to download the host file from one of the VA’s SFTP servers. The software is to be installed by each site’s or region’s designated VA OI&T IT OPERATIONS SERVICE, Enterprise Service Lines, Vista Applications Division.

4.8 Installation Procedure

Detailed instructions for installing the multi-build BPS IB PSO BUNDLE 11.0 (which includes BPS*1.0*23, IB*2.0*591, PSO*7.0*482) can be found on the patch description for BPS*1.0*23, which can be found on the NPM. Installing the multi-build BPS IB PSO BUNDLE 11.0 will install all three component patches (BPS*1.0*23, IB*2.0*591, PSO*7.0*482).

4.9 Installation Verification Procedure

Refer to the BPS*1.0*23 documentation on the NPM for detailed installation instructions. These instructions include any post installation steps if applicable.

4.10 System Configuration

No system configuration changes are required for this patch.

4.11 Database Tuning

No reconfiguration of the VistA database, memory allocations or other resources is necessary.

5 Back-Out Procedure

Back-Out pertains to a return to the last known good operational state of the software and appropriate platform settings.

5.1 Back-Out Strategy

A decision to back out could be made during Site Mirror Testing, during Site Production Testing, or after National Release to the field (VAMCs). The best strategy decision is dependent on the stage during which the decision is made.

5.1.1 Mirror Testing or Site Production Testing

If a decision to back out is made during Mirror Testing or Site Production Testing, a new version of the patch can be used to restore the build components to their pre-patch condition.

2 “Enterprise service lines, VAD” for short. Formerly known as the IRM (Information Resources Management) or IT support.
5.1.2 After National Release but During the Designated Support Period

If a decision to back out is made after national release and within the designated support period, a new patch will be entered into the NPM in Forum and will go through all the necessary milestone reviews, etc. as a patch for a patch. This patch could be defined as an emergency patch, and it could be used to address specific issues pertaining to the original patch or it could be used to restore the build components to their original pre-patch condition.

5.1.3 After National Release and Warranty Period

After the support period, the VistA Maintenance Program will produce the new patch, either to correct the defective components or restore the build components to their original pre-patch condition.

5.2 Back-Out Considerations

Changes implemented with multi-build BPS IB PSO BUNDLE 11.0 can be backed out in their entirety or on an enhancement-by-enhancement basis. Either could be accomplished via a new version of multi-build BPS IB PSO BUNDLE 11.0 if before national release or a new multi-build if after national release.

5.2.1 Load Testing

N/A. The back-out process will be executed at normal rather than raised job priority and is expected to have no significant effect on total system performance. Subsequent to the reversion, the performance demands on the system will be unchanged.

5.2.2 User Acceptance Testing

Below are the acceptance criteria for each story included in BPS IB PSO BUNDLE 11.0.

US19
- VistA ECME stores permanent pharmacy claim data using correct field sizes as mandated by the HIPAA NCPDP standard.
- VistA ECME sends pharmacy claim data using correct field sizes as mandated by the HIPAA NCPDP standard.
- The following screens have been modified to display correct field lengths for Name of Insured, Group Number, Group Name, and Subscriber ID:
  - Match Multiple Group Plans Option [IBCNR GROUP PLAN MATCH]
  - Match Group Plan to a Pharmacy Option [IBCNR PLAN MATCH]
  - Third Party Payer Rejects – View/Process [PSO REJECTS VIEW/PROCESS] (Reject Notification Screen)
  - Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST] (Reject Notification Screen)
- The following reports have been modified to display correct field lengths for Name of Insured, Group Number, Group Name, and Subscriber ID:
  - Group Plan Worksheet Report [IBCNR GROUP PLAN WORKSHEET]
  - Rejected Claims Report [BPS RPT REJECTION]
  - Closed Claims Report [BPS RPT CLOSED CLAIMS]
- Payable Claims Report [BPS RPT PAYABLE]
- Reversal Claims Report [BPS RPT REVERSAL]
- Claims Submitted, Not Yet Released [BPS RPT NOT RELEASED]
- Recent Transactions [BPS RPT RECENT TRANSACTIONS]

- File IB NCPDP EVENT LOG populates with the correct information before and after the installation of patch IB*2.0*497 for the following fields:
  - GROUP ID (.06)
  - CARDHOLDER ID (.07)
  - CARDHOLDER FIRST NAME (.101)
  - CARDHOLDER LAST NAME (.102)
  - GROUP NAME (.301)

US124

- Fill a prescription for a patient with TRICARE eligibility, primary OHI insurance and TRICARE Express Scripts secondary coverage. The primary claim will transmit automatically if the insurance file is set up correctly. Use the testing tool to make the primary claim payable and to add an amount for PATIENT PAY AMOUNT. Bill the TRICARE secondary coverage using the PRO option. The PRO options show the correct information, the secondary transaction populated with the correct primary claim information in the COB fields (listed above) and the information is stored in VistA. Use CRI Claim Response Inquiry to verify information is stored in VistA.

- Fill a prescription for a patient with TRICARE eligibility, primary OHI insurance and TRICARE Express Scripts secondary coverage. The primary claim will transmit automatically if the insurance file is set up correctly. Close the primary claim on the ECME User Screen. Bill the TRICARE secondary coverage using the PRO option. The PRO option shows the correct information, the secondary transaction populated with the correct information from the primary claim in the COB fields (listed above) and the information is stored in VistA. Use CRI Claim Response Inquiry to verify information is stored in VistA.

- VistA stores the Patient Pay Amount. Use CRI Claim Response Inquiry to verify information is stored in VistA.
- The Patient Pay Amount is available in the ePharmacy testing tool.
- RES Resubmit with Edits on the ECME User screen show the correct information for a secondary claim, the secondary transaction is populated with the correct primary claim information in the COB fields and the information is stored in VistA. Use CRI Claim Response Inquiry to verify information is stored in VistA.

US170

- Comments entered from the Reject Information screen are displayed in the ECME Log of View Prescription.
- All comments, including those made using the COM Add Comments action displayed in the ECME Log of View Prescription, continue to display all existing details associated with comments (e.g. date/time stamp, Refill number, Initiator of Activity, etc.). Please see screen shot included in the conversation for how the comments should appear in the ECME Log.
- The types of comments currently displayed in the ECME Log continue to display as they do now.

US399

- Enhance the RED Resubmit Claim w/Edits action on the ECME User screen to prompt for NCPDP fields that are not on a payer sheet and that are not stubs.
- Data in the transaction reflects the values of the fields selected by the user.
- "^" will allow the user to leave the action and return to the main screen.
- A comment is stored in the ECME log with wording from the functional design.
- The activity log comment can be 100 characters.
US433
- Label behavior matches the table for the following functionality:
  - Medication Profile, Action ED Edit
  - Worklist, Action ED Edit
  - Edit Prescriptions [PSO RXEDIT]

<table>
<thead>
<tr>
<th>Type</th>
<th>Label Printed</th>
<th>Released</th>
<th>Prompt user to print/reprint?</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMOP, transmitted</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Window fill</td>
<td>Y</td>
<td>N</td>
<td>Y</td>
</tr>
<tr>
<td>Window fill</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Window fill</td>
<td>N</td>
<td>N</td>
<td>Y</td>
</tr>
</tbody>
</table>

US434
- Label behavior matches the table for the following functionality:
  - Medication Profile, Action RES Resubmit
  - Worklist, Actions RES Resubmit, OVR Submit Override Codes, CLA Submit Clarif. Code, PA Submit Prior Auth., SMA Submit Mult. Actions

<table>
<thead>
<tr>
<th>Type</th>
<th>Label Printed</th>
<th>Released</th>
<th>Prompt user to print/reprint?</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMOP, transmitted</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Window fill</td>
<td>Y</td>
<td>N</td>
<td>Y</td>
</tr>
<tr>
<td>Window fill</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Window fill</td>
<td>N</td>
<td>N</td>
<td>Y</td>
</tr>
</tbody>
</table>

US572
- The following filter questions have been added: Prescriber, Patient Name, Billed Amount.
- The following filter questions allow selection of one, many or all: CMOP/Mail/Window, Billing Type (Real time, etc.), Reject Code, Eligibility, Drug/Drug Class, Prescriber, Patient.
- Prescriber can be selected by name or NPI.
- Billed Amount can be selected for all amounts or a range.
- Excel capture instructions have been reworded as per the functional design.
- The report heading has changed:
  - Add Prescriber and Patient to the last line
  - The following labels have a value of ALL or SELECTED: Insurance, Reject Code, Drugs/Classes, Prescriber, Patient
- The report column headings have changed:
  - Remove the column heading for DRUG (only the heading is removed, the drug will still display)
  - In place of DRUG, add Prescriber ID and Name
- The report display has changed:
  - Display the Prescriber ID and Name under the correct column headings
  - Remove the Claim ID
  - Display the Drug name where the Claim ID previously displayed
- Shorten labels in the Excel format heading, as noted in the chart in the functional design
  - Add labels for BIN, Prescriber ID, Prescriber, and Mult Rej
  - Remove the label for Cardhold. ID, Claim ID, and Reject Code(s)
• To avoid wrapping of the Excel format, limit the data line length to 255 characters
  o Remove parentheses around the Patient ID
  o Truncate the data fields as noted in the chart in the functional design
  o If needed, truncate the Reject Explanation to reduce the line length to 255 characters.

US575
• The reject codes have been updated in file BPS NCPDP REJECT CODES to reflect the codes that have been added and renamed per the functional design.
• The clarification codes have been updated in file BPS NCPDP CLARIFICATION CODES to reflect the codes that have been added and renamed per the functional design.
• The result of service codes have been updated in file BPS NCPDP RESULT OF SERVICE CODE to reflect the codes that have been renamed per the functional design.
• The other payer amount qualifiers have been updated in file BPS NCPDP OTHER PAYER AMT PAID QUAL to reflect the codes that have been added and renamed per the functional design.
• New and renamed reject codes can be
  o selected in the testing tool
  o received in a claim response and stored in VistA with the claim response
  o displayed on the ECME User screen and the Pharmacists’ Worklist
  o displayed on the Rejected Claims Report and Closed Claims Report
  o displayed on the LOG Print Claim Log (ECME User Screen)
• New and renamed submission clarification codes can be
  o selected in VistA for claim submission
  o sent in a claim request and stored in VistA with the claim request
  o displayed on the ECME User screen and the Pharmacists’ Worklist
• The new renamed other payer amount qualifiers can be
  o received in a claim response and stored in VistA with the claim response

US580
• The ECME User screen display matches the user’s saved profile or the user selection from CV, even if the stored fill type is something other than M or W.
• The following reports display correct information even if the stored fill type is something other than M or W:
  o PAY Payable Claims Report
  o REJ Rejected Claims Report
  o REV Reversal Claims Report
  o NYR Claims Submitted, Not Yet Released
  o REC Recent Transactions
  o DAY Totals by Date
  o CLO Closed Claims Report
  o NBS Non-Billable Status Report

US591
Acceptance Criteria refers to the following prompts in the CV Change View action of the ECME User Screen:
• Select Certain Pharmacy (D)ivisions or (A)LL: A/
• Select Certain Eligibility Type or (A)ll: A/
• Display One ECME (U)ser or (A)ll: A/
• Display One (P)atient or (A)LL: A/
• Display One (R)x or (A)LL: A/
• Display (R)ejects or (P)ayables or (U)nstranded or (A)LL: A/
• Display (C)MOP or (M)ail or (W)indow or (A)LL: A/
• Display (R)ealTime, (B)ackbills, (P)RO Option, Re(S)ubmission or (A)LL: A/
• Display Specific (R)eject Code or (A)LL: A// REJECT CODE
  o All prompts allow multiple selections, single selection or ALL.
  o The system will filter out duplicate responses.
  o The system will allow individual entries and a selection of ALL.
  o Help text is available.

US594
• Action MP Med Profile are available from option View ePharmacy Rx.
• Select action MP Med Profile and the displayed information matched the information displayed in action MP Medication Profile from the Reject Information screen.
• When scrolling through all screens in option View ePharmacy Rx, the MP Med Profile information is in the right order.
• The actions will not display with the Med Profile action.
• MP Medication Profile is available to be printed.

US598
• New option ePharmacy Patient Comment is on the ePharmacy Menu and requires security key PSO EPHARMACY SITE MANAGER.
  o The Add Comment action will allow the user to enter a new patient billing comment.
  o The Inactivate or Activate Comment action will allow the user to inactivate or activate an existing patient billing comment.
  o The Comment History action will display history for the comment, which includes additions, activations and inactivations.
  o Comments are displayed in reverse chronological order.
• The Reject Information screen displays the new comments in reverse chronological order in a new section called “Comments – Patient” and the original comment section is renamed to “Comments – Reject”.
• The Reject Information screen action of COM Add Comments will allow the user to enter a reject comment or a patient billing comment.
  o Help text is available when using the COM Add Comments action
  o Patient Comments cannot be edited or inactivated from the COM action.
• The Reject Notification screen displays the patient billing comment under the Cardholder ID.
• Patient Comments default to active when entered from both the option ePharmacy Patient Comment and the COM Add Comments on the Reject Information Screen.
• The Patient Comment captures, stores and displays the comment, user, date and time.
• Only active Patient Comments are displayed on the Reject Information Screens.

US599
• ePharmacy Site Parameters contains a prompt for Ignore Threshold in the General Parameters section.
• The action EA Edit All Parameters and EG Edit General Parameters include the new parameter.
• The Ignore Threshold is not required and can be update or deleted.
• Users can enter a value of 0 and 9999999.
• The Reject Notification Screen and the Reject Information Screen will allow the user to ignore when the threshold has been met or exceeded but only if the user holds security key EPHARMACY SITE MANAGER.
• The Reject Notification Screen and the Reject Information Screen both display a message when IGNORE is chosen and the gross amount due equals or exceeds the threshold.
US1441
- The ECME Developers Log displays the claim status at the time of label printing.
- The ECME Developers Log displays the menu option and action (if available) used to print the label.
- The ECME Developers Log displays the open rejects on the Third Party Rejects Worklist at the time of label printing.

US1907
- A new prompt is added allowing the user to specify a Date Range or Timeframe
- Help text is available explaining the difference between the Date Range and Timeframe
- An ‘Activity Date Range’ prompt has been added allowing the user to enter a date range by entering an ‘Activity Beginning Date’ and an ‘Activity Ending Date’.
- The timeframe lookback restriction of 999 days is changed to 180 days.
- A rule has been added to prevent user from exceeding a 180-day date range.
- A rule has been added to prevent user from entering an end date that precedes the beginning date.
- A warning ‘Ending Date precedes Beginning Date’ is displayed when the end date precedes the beginning date.
- A warning ‘Date range exceeds 180 day limit. Select an Ending Date which is no more than 180 days after the Beginning Date.’ if range exceeds 180 days.
- Add functionality: If Activity ‘Date Range’ is selected, then show date range in report header.

US3387
- When entering a new order, a CHAMPVA patient’s prescription does not generate a label prompt if the insurer is asleep.
- When entering a new order, a TRICARE patient’s prescription does not generate a label prompt if the insurer is asleep.
- When entering a new order, a Veteran patient’s prescription DOES generate a label prompt if the insurer is asleep which is existing behavior.

US3481
- The default value for the Prescriber filter question is “A”.

5.3 Back-Out Criteria
It may be decided to back out this patch if the project is canceled, the requested changes implemented by multi-build BPS IB PSO BUNDLE 11.0 are no longer desired by VA OI&T and the ePharmacy eBusiness team, or the patch produces catastrophic problems.

5.4 Back-Out Risks
Since the ePharmacy software is tightly integrated with external systems, any attempt at a back-out should include close consultation with the external trading partners such as the Financial Services Center (FSC) and the Health Care Clearing House (HCCH) to determine risk.

5.5 Authority for Back-Out
The order would come from: release coordinator (product support), portfolio director, and health product support. The order should be done in consultation with the development team and
external trading partners such as FSC and the HCCH to determine the appropriate course of action. ePharmacy is tightly integrated with these external partners and a decision to back-out should not be made without their consultation.

5.6 Back-Out Procedure

Backing out enhancements to a VistA application is often complex. Normally, defects are repaired via a follow-up patch. The development team recommends that sites log a ticket if there is a nationally released patch to be backed out, or sites could contact the Enterprise Program Management Office (EPMO) team directly for specific solutions to their unique problems.

Multi-build BPS IB PSO BUNDLE 11.0 contains the following build components:

- Routines
- File entries in multiple files
- Data Dictionary Changes
- Protocols
- List Templates
- Menu Options

While the VistA KIDS installation procedure allows the installer to back up the modified routines using the ‘Backup a Transport Global’ action, the back-out procedure for global, data dictionary and other VistA components is more complex and requires issuance of a follow-up patch to ensure all components are properly removed and/or restored. All software components (routines and other items) must be restored to their previous state at the same time and in conjunction with the restoration of the data.

Please contact the EPMO team for assistance since this installed patch contains components in addition to routines.

5.7 Back-out Verification Procedure

Successful back-out is confirmed by verification that the back-out patch was successfully installed.

6 Rollback Procedure

Rollback pertains to data. The data changes in this patch are specific to the operational software and platform settings. These data changes are covered in the Back-out procedures detailed elsewhere in this document.

6.1 Rollback Considerations

Not applicable.

6.2 Rollback Criteria

Not applicable.
6.3 Rollback Risks
Not applicable.

6.4 Authority for Rollback
Not applicable.

6.5 Rollback Procedure
Not applicable.

6.6 Rollback Verification Procedure
Not applicable.
## Template Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Version</th>
<th>Description</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 2016</td>
<td>2.2</td>
<td>Changed the title from Installation, Back-Out, and Rollback Guide to Deployment and Installation Guide, with the understanding that Back-Out and Rollback belong with Installation.</td>
<td>VIP Team</td>
</tr>
<tr>
<td>February 2016</td>
<td>2.1</td>
<td>Changed title from Installation, Back-Out, and Rollback Plan to Installation, Back-Out, and Rollback Guide as recommended by OI&amp;T Documentation Standards Committee</td>
<td>OI&amp;T Documentation Standards Committee</td>
</tr>
<tr>
<td>December 2015</td>
<td>2.0</td>
<td>The OI&amp;T Documentation Standards Committee merged the existing “Installation, Back-Out, Rollback Plan” template with the content requirements in the OI&amp;T End-user Documentation Standards for a more comprehensive Installation Plan.</td>
<td>OI&amp;T Documentation Standards Committee</td>
</tr>
<tr>
<td>February 2015</td>
<td>1.0</td>
<td>Initial Draft</td>
<td>Lifecycle and Release Management</td>
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