

ePharmacy

**PHASE V**

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

**RELEASE NOTES**

BPS\*1\*10

October 2011

Department of Veterans Affairs

Product Development

**Table of Contents**

[1. Introduction 1](#_Toc303771756)

[1.1. Documentation Distribution 1](#_Toc303771757)

[2. Patch Description and Installation Instructions 3](#_Toc303771758)

[2.1. Patch Description 3](#_Toc303771759)

[2.2. Pre/Post Installation Overview 18](#_Toc303771760)

[2.3. Installation Instructions 19](#_Toc303771761)

[3. Enhancements 25](#_Toc303771762)

[3.1. Technical Modifications 25](#_Toc303771763)

[3.1.1 NCPDP Version D.0 25](#_Toc303771764)

[3.1.2 Eligibility Verification Processing 25](#_Toc303771765)

[3.1.3 Eligibility Verification Hidden Action 25](#_Toc303771766)

[3.1.4 New ECME Number Length 25](#_Toc303771767)

[3.1.5 New Fields in Claim Log 25](#_Toc303771768)

[3.1.6 Spending Account Report 26](#_Toc303771769)

[3.1.7 New Fields in ECME Claims-Response Inquiry 26](#_Toc303771770)

[3.1.8 Changes to Payer Sheet Detail Report 26](#_Toc303771771)

[3.1.9 Changes to Resubmit Claim w/EDITS 26](#_Toc303771772)

[3.1.10 Changes to BPS Edit Basic ECME Parameters 26](#_Toc303771773)

[3.1.11 Changes to Process Secondary/TRICARE Rx to ECME 26](#_Toc303771774)

[3.1.12 Changes to View/Unstrand Claims Not Completed 26](#_Toc303771775)

[3.1.13 Changes to Statistics Screen 27](#_Toc303771776)

[3.1.14 Suppression of Eligibility Transmissions on ECME User Screen 27](#_Toc303771777)

[3.1.15 Changes to Claim Results and Status Reports 27](#_Toc303771778)

[3.1.16 Changes to Turn-Around Time Statistics 27](#_Toc303771779)

[3.1.17 Changes to ECME Bulletin 27](#_Toc303771780)

[3.1.18 Changes to Insurer Asleep Functionality 27](#_Toc303771781)

[3.2. Issue Resolutions 27](#_Toc303771782)

[3.2.1 New Service Requests (NSRs) 27](#_Toc303771783)

[3.2.2 Remedy Tickets 27](#_Toc303771784)

*(This page included for two-sided copying.)*

# Introduction

This patch has enhancements that 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\*359

Integrated Billing (IB) V. 2.0 IB\*2\*435

Electronic Claims Management Engine (ECME) V. 1.0 BPS\*1\*10

Accounts Receivable (PRCA) V. 4.5 PRCA\*4.5\*271

The four patches (PSO\*7\*359, IB\*2\*435, BPS\*1\*10, and PRCA\*4.5\*271) are being released in the Kernel Installation and Distribution System (KIDS) multi-build distribution BPS PSO IB PRCA BUNDLE 6.0. For more specific instructions please refer to the installation steps provided in each of the patches.

For the pharmacy claims that are processed electronically, the ePharmacy module is currently compliant with the National Council for Prescription Drug Programs (NCPDP) industry standards for version 5.1. NCPDP version D.0 Level 1 compliance (completion of internal testing) must be in place by January 1, 2011, and it must have completed external testing with

payers and be in production as of January 1, 2012. Meeting the deliverable dates is essential to VHA meeting this legislative mandate and for continued business with pharmacy payers. As part of these changes, VHA should also have backwards compatibility to the NCPDP version 5.1 to allow for continued revenue and processing of VHA pharmacy claims.

The combined build will allow the processing and release of prescriptions for patients with Insurance payers that use the new NCPDP version D.0 format for electronic claims processing as well as the current NCPDP version 5.1 format.

## Documentation Distribution

The documentation distribution includes:

    FILE NAME                         DESCRIPTION

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

BPS\_1\_P10\_RN.PDF ECME Release Notes

BPS\_1\_P10\_UM.PDF ECME User Manual

BPS\_1\_P10\_TM.PDF ECME Technical Manual

*(This page included for two-sided copying.)*

# Patch Description and Installation Instructions

## Patch Description

DHCP Patch Display Page: 1

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

Run Date: SEP 13, 2011 Designation: BPS\*1\*10

Package : E CLAIMS MGMT ENGINE Priority : MANDATORY

Version : 1 Status : RELEASED

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

Associated patches: (v)BPS\*1\*9 <<= must be installed BEFORE `BPS\*1\*10'

Subject: ePharmacy Phase 5 - NCPDP D.0

Category: DATA DICTIONARY

ROUTINE

ENHANCEMENT

OTHER

Description:

===========

This patch has enhancements that 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\*359

INTEGRATED BILLING (IB) V. 2.0 IB\*2\*435

ELECTRONIC CLAIMS MANAGEMENT ENGINE (ECME) V. 1.0 BPS\*1\*10

ACCOUNTS RECEIVABLE (PRCA) V. 4.5 PRCA\*4.5\*271

The four patches (PSO\*7\*359, IB\*2\*435, BPS\*1\*10, and PRCA\*4.5\*271) are

being released in the Kernel Installation and Distribution System (KIDS)

multi-build distribution BPS PSO IB PRCA BUNDLE 6.0. For more specific

instructions please refer to the installation steps provided in each of

the patches.

For the pharmacy claims that are processed electronically, the ePharmacy

module is currently compliant with the National Council for Prescription

Drug Programs (NCPDP) industry standards for version 5.1. NCPDP version

D.0 Level 1 compliance (completion of internal testing) must be in place

by January 1, 2011, and it must have completed external testing with

payers and be in production as of January 1, 2012. Meeting the deliverable

dates is essential to VHA meeting this legislative mandate and for

continued business with pharmacy payers. As part of these changes, VHA

should also have backwards compatibility to the NCPDP version 5.1 to allow

for continued revenue and processing of VHA pharmacy claims.

The combined build will allow the processing and release of prescriptions

for patients with Insurance payers that use the new NCPDP version D.0

format for electronic claims processing as well as the current NCPDP

version 5.1 format.

This specific patch contains the following functionality:

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

1. ECME was enhanced to send third party claims using the NCPDP

Telecommunication Standard version D.0 specifications, which complies

with new HIPAA requirements. Backwards compatibility with NCPDP

Telecommunication Standard version 5.1 will be maintained until all

third party payers are ready to support version D.0.

2. ECME was enhanced to process Eligibility Verification requests, which

will allow the sites to verify pharmacy insurance for patients. The

process is initiated either through the new Eligibility Inquiry hidden

(ELIG) action on the Further Research menu of the ECME User Screen

[BPS USER SCREEN] or through a new IB option called Initiate

e-Pharmacy Eligibility Inquiry [IBCNR ELIGIBILITY INQUIRY]. The

results of the request will be displayed in the IB Insurance Buffer.

Please see IB patch IB\*2.0\*435 for more detailed information on the

new IB option and changes to the IB Insurance Buffer.

3. A new hidden action - Eligibility Inquiry (ELIG) - was added to the

Further Research Menu of the ECME User Screen [BPS USER SCREEN] to

allow users to initiate Eligibility Verification requests for billing

requests that are rejected. The user will be prompted for the

Relationship Code, Person Code, and Effective Date, which will be

included in the data of the Eligibility Verification Request.

4. With NCPDP version D.0, the ECME number has increased in size from 7

characters to 12 characters. To support this change, the following

options were updated.

a. ECME User Screen [BPS USER SCREEN]

b. Rejected Claims Report [BPS RPT REJECTION]

c. Payable Claims Report [BPS RPT PAYABLE]

d. Reversal Claims Report [BPS RPT REVERSAL]

e. Claims Submitted, Not Yet Released [BPS RPT NOT RELEASED]

f. Closed Claims Report [BPS RPT CLOSED CLAIMS]

g. Recent Transactions [BPS RPT RECENT TRANSACTIONS]

h. Process Secondary/TRICARE Rx to ECME [BPS COB PROCESS SECOND

TRICARE]

i. Reopen Closed Claims action on the ECME User Screen [BPS USER

SCREEN]

5. The Claim Log (LOG) action on the ECME User Screen [BPS USER SCREEN]

was updated to display new NCPDP version D.0 fields that may be

returned by the payer in a NCPDP version D.0 response. It was also

updated to synchronize the display more closely with the Reject

Information screen of the Third Party Payer Rejects - Worklist [PSO

REJECTS WORKLIST] and the Third Party Payer Rejects - View/Process

[PSO REJECTS VIEW/PROCESS] options.

6. A new option Spending Account Report [BPS RPT SPENDING ACCOUNT] was

added to the Claim Results and Status [BPS MENU RPT CLAIM STATUS] menu

to display additional NCPDP version D.0 paid amount information that

may be returned by the third party payer in a NCPDP version D.0

response.

7. The ECME Claims-Response Inquiry [BPS RPT CLAIMS RESPONSE] option was

updated to display additional NCPDP version D.0 fields that are

included in the outgoing request and the incoming payer response.

8. The Payer Sheet Detail Report [BPS RPT PAYER SHEET DETAIL] was updated

to include new NCPDP version D.0 segments and fields that are in

version D.0 payer sheets. This report was also modified to remove the

display of the Reversal Format, Reversal Sheet, Transaction Count and

Certification ID headers and data in the header section of the report.

These fields are plan specific and are no longer maintained with the

payer sheets. To see this information, you should view the PLAN

information using the appropriate IB option.

9. The Resubmit Claim w/EDITS (RED) action on the ECME User Screen [BPS

USER SCREEN] was updated to prompt the user for the new NCPDP version

D0 fields Patient Residence Code, Pharmacy Service Type Code, and

Delay Reason Code. In addition, this option was updated to allow the

entry of up to three Submission Clarification codes.

10. The BPS Edit Basic ECME Parameters [SETUP BASIC PARAMS] was modified

to prompt for the Default Eligibility Pharmacy. This Pharmacy will be

placed on the NCPDP Eligibility Verification request when it

initiated by the new option in IB.

11. The Process Secondary/TRICARE Rx to ECME [BPS COB PROCESS SECOND

TRICARE] option was modified to support the changes to the list of

valid Paid Amount Qualifiers that occurred with the release of NCPDP

version D.0. This is also true if a secondary claim is being

processed through the Resubmit Claim w/EDITS (RED) action on the ECME

User Screen [BPS USER SCREEN].

12. The name of the View/Unstrand Claims Not Completed [BPS UNSTRAND

SCREEN] option was changed to View/Unstrand Submissions Not Completed

to reflect that it is also includes Eligibility Verification

submissions. The screen was also modified to show each type of

transaction (Billing Request, Reversal, and Eligibility Submissions)

in their own section with a sub header at the beginning of each

section.

13. The Statistics Screen [BPS STATISTICS SCREEN] was modified to include

two new categories - one for accepted Eligibility Verification

request and the other for rejected Eligibility Verification

requests.

14. The ECME User Screen [BPS USER SCREEN] was updated to suppress the

display of Eligibility Verification transmissions.

15. All of the claims reports on the Claim Results and Status [BPS MENU

RPT CLAIM STATUS] menu were updated to not display the results of

Eligibility Verification requests.

16. The Turn-around time statistics [BPS RPT TURNAROUND STATS] was

modified to not display the results of Eligibility Verification

requests.

17. The ECME bulletin, which is sent when ECME claims cannot be

processed, was updated to include the site number in the Subject of

the mail message.

18. The Insurer Asleep functionality used by the NCPDP claims

submission process was updated to correct some existing

deficiencies and to allow it to function with Eligibility

verification submissions.

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

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

Request Name: e-Pharmacy Phase 5: FY09

Request ID: 20080103

This patch addresses the following Remedy Tickets:

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

There are no Remedy Tickets associated with this patch.

Components Sent With Patch

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

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

UP SEND DATA USER

DATE SEC. COMES SITE RSLV OVER

FILE # FILE NAME DD CODE W/FILE DATA PTRS RIDE

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

9002313.02 BPS CLAIMS YES YES NO

9002313.03 BPS RESPONSES YES YES NO

9002313.15 BPS ASLEEP PAYERS YES YES NO NO

9002313.19 BPS NCPDP PATIENT RELATIO YES YES YES OVER NO NO

NSHIP CODE

9002313.21 BPS NCPDP PROFESSIONAL SE YES YES YES OVER NO NO

RVICE CODE

9002313.22 BPS NCPDP RESULT OF SERVI YES YES YES OVER NO NO

CE CODE

9002313.23 BPS NCPDP REASON FOR SERV YES YES YES OVER NO NO

ICE CODE

9002313.24 BPS NCPDP DAW CODE YES YES YES OVER NO NO

9002313.26 BPS NCPDP PRIOR AUTHORIZA YES YES YES OVER NO NO

TION TYPE CODE

9002313.27 BPS NCPDP PATIENT RESIDEN YES YES YES OVER NO NO

CE CODE

9002313.28 BPS NCPDP PHARMACY SERVIC YES YES YES OVER NO NO

E TYPE

9002313.29 BPS NCPDP DELAY REASON CO YES YES YES OVER NO NO

DE

9002313.31 BPS CERTIFICATION YES YES NO NO

9002313.32 BPS PAYER RESPONSE OVERRI YES YES NO NO

DES

9002313.57 BPS LOG OF TRANSACTIONS YES YES NO NO

9002313.58 BPS STATISTICS YES YES NO NO

9002313.59 BPS TRANSACTION YES YES NO NO

9002313.77 BPS REQUESTS YES YES NO NO

9002313.78 BPS INSURER DATA YES YES NO NO

9002313.91 BPS NCPDP FIELD DEFS YES YES YES OVER NO NO

9002313.92 BPS NCPDP FORMATS YES YES NO NO

9002313.93 BPS NCPDP REJECT CODES YES YES YES OVER NO NO

9002313.94 BPS NCPDP FIELD CODES YES YES YES OVER NO NO

9002313.99 BPS SETUP YES YES NO NO

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

Field Name (Number) File Name (Number)

Subfile Name (Number)

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

MEDICAID SUBROGATION ICN/TCN (114) BPS CLAIMS (9002313.02)

MEDICAID ID NUMBER (115) BPS CLAIMS (9002313.02)

MEDICAID AGENCY NUMBER (116) BPS CLAIMS (9002313.02)

PATIENT E-MAIL ADDRESS (350) BPS CLAIMS (9002313.02)

OTHER PAYER CARDHOLDER ID (356) BPS CLAIMS (9002313.02)

MEDIGAP ID (359) BPS CLAIMS (9002313.02)

MEDICAID INDICATOR (360) BPS CLAIMS (9002313.02)

PROVIDER ACCEPT ASSGNMT INDCTR (361) BPS CLAIMS (9002313.02)

PATIENT RESIDENCE (384) BPS CLAIMS (9002313.02)

OTHER PAYER BIN NUMBER (990) BPS CLAIMS (9002313.02)

OTHER PAYER PROCESSOR CNTRL NO (991) BPS CLAIMS (9002313.02)

OTHER PAYER GROUP ID (992) BPS CLAIMS (9002313.02)

CMS PART D DEFINED QLFD FACLTY (997) BPS CLAIMS (9002313.02)

MEDICAID PAID AMOUNT (113) TRANSACTIONS (sub-file)

(9002313.0201)

BILLING ENTITY TYPE INDICATOR (117) TRANSACTIONS (sub-file)

(9002313.0201)

PAY TO QUALIFIER (118) TRANSACTIONS (sub-file)

(9002313.0201)

PAY TO ID (119) TRANSACTIONS (sub-file)

(9002313.0201)

PAY TO NAME (120) TRANSACTIONS (sub-file)

(9002313.0201)

PAY TO STREET ADDRESS (121) TRANSACTIONS (sub-file)

(9002313.0201)

PAY TO CITY ADDRESS (122) TRANSACTIONS (sub-file)

(9002313.0201)

PAY TO STATE/PROVINCE ADDRESS (123) TRANSACTIONS (sub-file)

(9002313.0201)

PAY TO ZIP/POSTAL ZONE (124) TRANSACTIONS (sub-file)

(9002313.0201)

GENERIC EQVLNT PRODUCT ID QLFR (125) TRANSACTIONS (sub-file)

(9002313.0201)

GENERIC EQUIVALENT PRODUCT ID (126) TRANSACTIONS (sub-file)

(9002313.0201)

PHARMACY SERVICE TYPE (147) TRANSACTIONS (sub-file)

(9002313.0201)

SUBM CLARIFICATION CODE COUNT (354) TRANSACTIONS (sub-file)

(9002313.0201)

DELAY REASON CODE (357) TRANSACTIONS (sub-file)

(9002313.0201)

PRESCRIBER FIRST NAME (364) TRANSACTIONS (sub-file)

(9002313.0201)

PRESCRIBER STREET ADDRESS (365) TRANSACTIONS (sub-file)

(9002313.0201)

PRESCRIBER CITY ADDRESS (366) TRANSACTIONS (sub-file)

(9002313.0201)

PRESCRIBER STATE/PROV ADDRESS (367) TRANSACTIONS (sub-file)

(9002313.0201)

PRESCRIBER ZIP/POSTAL ZONE (368) TRANSACTIONS (sub-file)

(9002313.0201)

ADDITIONAL DOCUMNTN TYPE ID (369) TRANSACTIONS (sub-file)

(9002313.0201)

LENGTH OF NEED (370) TRANSACTIONS (sub-file)

(9002313.0201)

LENGTH OF NEED QUALIFIER (371) TRANSACTIONS (sub-file)

(9002313.0201)

PRESCRIBER/SUPPLIER DT SIGNED (372) TRANSACTIONS (sub-file)

(9002313.0201)

REQUEST STATUS (373) TRANSACTIONS (sub-file)

(9002313.0201)

REQUEST PERIOD BEGIN DATE (374) TRANSACTIONS (sub-file)

(9002313.0201)

REQUEST PD RECERT/REVISED DATE (375) TRANSACTIONS (sub-file)

(9002313.0201)

SUPPORTING DOCUMENTATION (376) TRANSACTIONS (sub-file)

(9002313.0201)

QUESTION NUMBER/LETTER COUNT (377) TRANSACTIONS (sub-file)

(9002313.0201)

FACILITY NAME (385) TRANSACTIONS (sub-file)

(9002313.0201)

FACILITY STREET ADDRESS (386) TRANSACTIONS (sub-file)

(9002313.0201)

FACILITY STATE/PROV ADDRESS (387) TRANSACTIONS (sub-file)

(9002313.0201)

FACILITY CITY ADDRESS (388) TRANSACTIONS (sub-file)

(9002313.0201)

FACILITY ZIP/POSTAL ZONE (389) TRANSACTIONS (sub-file)

(9002313.0201)

NARRATIVE MESSAGE (390) TRANSACTIONS (sub-file)

(9002313.0201)

PATIENT ASSIGNMENT INDICATOR (391) TRANSACTIONS (sub-file)

(9002313.0201)

TRANSACTION REFERENCE NUMBER (880) TRANSACTIONS (sub-file)

(9002313.0201)

ROUTE OF ADMINISTRATION (995) TRANSACTIONS (sub-file)

(9002313.0201)

COMPOUND TYPE (996) TRANSACTIONS (sub-file)

(9002313.0201)

QUESTION NUMBER/LETTER COUNTER (.01) QUESTION NUMBER/LETTER MLTPL

(sub-file) (9002313.023771)

QUESTION NUMBER/LETTER (378) QUESTION NUMBER/LETTER MLTPL

(sub-file) (9002313.023771)

QUESTION PERCENT RESPONSE (379) QUESTION NUMBER/LETTER MLTPL

(sub-file) (9002313.023771)

QUESTION DATE RESPONSE (380) QUESTION NUMBER/LETTER MLTPL

(sub-file) (9002313.023771)

QUESTION DOLLAR AMT RESPONSE (381) QUESTION NUMBER/LETTER MLTPL

(sub-file) (9002313.023771)

QUESTION NUMERIC RESPONSE (382) QUESTION NUMBER/LETTER MLTPL

(sub-file) (9002313.023771)

QUESTION ALPHANUMERIC RESPONSE (383) QUESTION NUMBER/LETTER MLTPL

(sub-file) (9002313.023771)

OTHER PAYER-PAT RESP AMT COUNT (353) COB OTHER PAYMENTS

(sub-file) (9002313.0401)

BENEFIT STAGE COUNT (392) COB OTHER PAYMENTS

(sub-file) (9002313.0401)

INTERNAL CONTROL NUMBER (993) COB OTHER PAYMENTS

(sub-file) (9002313.0401)

COMPND INGRED MDFR CODE COUNT (362) COMPOUND REPEATING FIELDS

(sub-file) (9002313.0501)

COMPND INGRED MDFR COUNTER (.01) COMPND INGRED MDFR MLTPL

(sub-file) (9002313.05011)

COMPOUND INGRED MODIFIER CODE (363) COMPND INGRED MDFR MLTPL

(sub-file) (9002313.05011)

OTHER PAYER-PATIENT COUNTER (.01) OTHER PAYER-PATIENT RESP MLTPL

(sub-file) (9002313.401353)

OTHER PAYER-PT RESP AMT QUALFR (351) OTHER PAYER-PATIENT RESP MLTPL

(sub-file) (9002313.401353)

OTHER PAYER-PATIENT RESP AMT (352) OTHER PAYER-PATIENT RESP MLTPL

(sub-file) (9002313.401353)

BENEFIT STAGE COUNTER (.01) BENEFIT STAGE MLTPL

(sub-file) (9002313.401392)

BENEFIT STAGE QUALIFIER (393) BENEFIT STAGE MLTPL

(sub-file) (9002313.401392)

BENEFIT STAGE AMOUNT (394) BENEFIT STAGE MLTPL

(sub-file) (9002313.401392)

MEDICAID ID INDICATOR (115) BPS RESPONSES (9002313.03)

MEDICAID AGENCY NUMBER (116) BPS RESPONSES (9002313.03)

CARDHOLDER ID (302) BPS RESPONSES (9002313.03)

DATE OF BIRTH (304) BPS RESPONSES (9002313.03)

PATIENT FIRST NAME (310) BPS RESPONSES (9002313.03)

PATIENT LAST NAME (311) BPS RESPONSES (9002313.03)

MEDICAID SUBROGATION ICN/TCN (114) RESPONSES (sub-file) (9002313.0301)

SPENDING ACCOUNT AMT REMAINING (128) RESPONSES (sub-file) (9002313.0301)

HEALTH PLAN-FUNDED ASSTNCE AMT (129) RESPONSES (sub-file) (9002313.0301)

ADDITIONAL MESSAGE INFO COUNT (130) RESPONSES (sub-file) (9002313.0301)

AMT ATTRIB TO PRVDR NTWRK SEL (133) RESPONSES (sub-file) (9002313.0301)

AMT ATTR PROD SEL BRAND DRUG (134) RESPONSES (sub-file) (9002313.0301)

AMT ATTR PRD NON-PREF FRMLRY (135) RESPONSES (sub-file) (9002313.0301)

AMT ATTR BRAND NON-PREF FRMLRY (136) RESPONSES (sub-file) (9002313.0301)

AMOUNT ATTRIB TO COVERAGE GAP (137) RESPONSES (sub-file) (9002313.0301)

CMS LICS LEVEL (138) RESPONSES (sub-file) (9002313.0301)

MEDICARE PART D COVERAGE CODE (139) RESPONSES (sub-file) (9002313.0301)

NEXT MEDICARE PART D EFFCTV DT (140) RESPONSES (sub-file) (9002313.0301)

CONTRACT NUMBER (240) RESPONSES (sub-file) (9002313.0301)

OTHER PAYER ID COUNT (355) RESPONSES (sub-file) (9002313.0301)

BENEFIT STAGE COUNT (392) RESPONSES (sub-file) (9002313.0301)

AMOUNT ATTRIBUTED TO PROC FEE (571) RESPONSES (sub-file) (9002313.0301)

AMOUNT OF COINSURANCE (572) RESPONSES (sub-file) (9002313.0301)

BASIS OF CALC-COINSURANCE (573) RESPONSES (sub-file) (9002313.0301)

PLAN SALES TAX AMOUNT (574) RESPONSES (sub-file) (9002313.0301)

PATIENT SALES TAX (575) RESPONSES (sub-file) (9002313.0301)

ESTIMATED GENERIC SAVINGS (577) RESPONSES (sub-file) (9002313.0301)

BENEFIT ID (757) RESPONSES (sub-file) (9002313.0301)

TRANSACTION REFERENCE NUMBER (880) RESPONSES (sub-file) (9002313.0301)

FORMULARY ID (926) RESPONSES (sub-file) (9002313.0301)

URL (987) RESPONSES (sub-file) (9002313.0301)

INTERNAL CONTROL NUMBER (993) RESPONSES (sub-file) (9002313.0301)

OTHER PAYER ID COUNTER (.01) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER HELP DESK PHONE NO (127) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER PERSON CODE (142) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER PATIENT REL CODE (143) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER EFFECTIVE DATE (144) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER TERMINATION DATE (145) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER COVERAGE TYPE (338) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER ID QUALIFIER (339) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER ID (340) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER CARDHOLDER ID (356) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER PROCESSOR CNTRL NO (991) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

OTHER PAYER GROUP ID (992) OTHER PAYER ID MLTPL

(sub-file) (9002313.035501)

BENEFIT STAGE COUNTER (.01) BENEFIT STAGE INFO

(sub-file) (9002313.039201)

DUR ADDITIONAL TEXT (570) DUR PPS (sub-file) (9002313.1101)

ADDITIONAL MESSAGE COUNTER (.01) ADDITIONAL MESSAGE MLTPL

(sub-file) (9002313.13001)

ADDITIONAL MSG INFO CONTINUITY (131) ADDITIONAL MESSAGE MLTPL

(sub-file) (9002313.13001)

ADDITIONAL MSG INFO QUALIFIER (132) ADDITIONAL MESSAGE MLTPL

(sub-file) (9002313.13001)

BILLING PAYER SHEET (.04) BPS CERTIFICATION (9002313.31)

REVERSAL PAYER SHEET (.05) BPS CERTIFICATION (9002313.31)

MAX CLAIMS PER TRANSMISSION (.06) BPS CERTIFICATION (9002313.31)

COB INDICATOR (.07) BPS CERTIFICATION (9002313.31)

ELIGIBILITY PAYER SHEET (.08) BPS CERTIFICATION (9002313.31)

\*\*\*ALL SUBFIELDS\*\*\* BPS CERTIFICATION (9002313.31)

-SUB CLARIFICATION CODE MULT

(sub-file) (9002313.3122)

\*\*\*ALL SUBFIELDS\*\*\* BPS CERTIFICATION (9002313.31)

-COB MULTIPLE (sub-file)

(9002313.3123)

\*\*\*ALL SUBFIELDS\*\*\* BPS CERTIFICATION (9002313.31)

-OTHER PAYER AMT PAID MULTIPLE

(sub-file) (9002313.31231)

\*\*\*ALL SUBFIELDS\*\*\* BPS CERTIFICATION (9002313.31)

-OTHER PAYER REJECT MULTIPLE

(sub-file) (9002313.31232)

\*\*\*ALL SUBFIELDS\*\*\* BPS CERTIFICATION (9002313.31)

-OTHER PAYER PATIENT RESP MULT

(sub-file) (9002313.31233)

\*\*\*ALL SUBFIELDS\*\*\* BPS CERTIFICATION (9002313.31)

-BENEFIT STAGE MULT (sub-file)

(9002313.31234)

\*\*\*ALL SUBFIELDS\*\*\* BPS CERTIFICATION (9002313.31)

-OTHER AMT CLAIMED MULT

(sub-file) (9002313.3124)

TYPE (.02) BPS PAYER RESPONSE OVERRIDES

(9002313.32)

ELIGIBILITY RESPONSE (.08) BPS PAYER RESPONSE OVERRIDES

(9002313.32)

POLICY NUMBER (1.05) BPS LOG OF TRANSACTIONS (9002313.57)

TRANSACTION TYPE (19) BPS LOG OF TRANSACTIONS (9002313.57)

RX ACTION (1201) BPS LOG OF TRANSACTIONS (9002313.57)

B1 PAYER SHEET (902.02) BPS LOG OF TRANSACTIONS (9002313.57)

-PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.57902)

B3 PAYER SHEET (902.21) BPS LOG OF TRANSACTIONS (9002313.57)

-PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.57902)

E1 PAYER SHEET (902.34) BPS LOG OF TRANSACTIONS (9002313.57)

-PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.57902)

POLICY NUMBER (902.35) BPS LOG OF TRANSACTIONS (9002313.57)

-PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.57902)

MAXIMUM NCPDP TRANSACTIONS (902.36) BPS LOG OF TRANSACTIONS (9002313.57)

-PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.57902)

RESULT - ELIGIBILITY ACCEPTED (209) BPS STATISTICS (9002313.58)

RESULT - ELIGIBILITY REJECTED (210) BPS STATISTICS (9002313.58)

POLICY NUMBER (1.05) BPS LOG OF TRANSACTIONS (9002313.59)

E1 PAYER SHEET (902.34) BPS LOG OF TRANSACTIONS/

PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.59902)

POLICY NUMBER (902.35) BPS LOG OF TRANSACTIONS/

PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.59902)

MAXIMUM NCPDP TRANSACTIONS (902.36) BPS LOG OF TRANSACTIONS/

PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.59902)

KEY1 (.01) BPS REQUESTS (9002313.77)

KEY2 (.02) BPS REQUESTS (9002313.77)

ECME TRANSACTION RECORD (.06) BPS REQUESTS (9002313.77)

RX ACTION (1.01) BPS REQUESTS (9002313.77)

OUTPATIENT SITE (1.02) BPS REQUESTS (9002313.77)

TRANSACTION TYPE (1.04) BPS REQUESTS (9002313.77)

RX NUMBER (1.13) BPS REQUESTS (9002313.77)

FILL NO (1.14) BPS REQUESTS (9002313.77)

PATIENT (1.15) BPS REQUESTS (9002313.77)

POLICY NUMBER (1.16) BPS REQUESTS (9002313.77)

DATE OF SERVICE (2.01) BPS REQUESTS (9002313.77)

CLARIFICATION CODE (2.05) BPS REQUESTS (9002313.77)

DELAY REASON CODE (2.1) BPS REQUESTS (9002313.77)

INACTIVATION REASON (9.01) BPS REQUESTS (9002313.77)

E1 PAYER SHEET (.1) BPS INSURER DATA (9002313.78)

POLICY NUMBER (.11) BPS INSURER DATA (9002313.78)

MAXIMUM NCPDP TRANSACTIONS (2.07) BPS INSURER DATA (9002313.78)

E1 PAYER SHEET NAME (4.04) BPS INSURER DATA (9002313.78)

VERSION (1.02) BPS NCPDP FORMATS (9002313.92)

ADDL DOCUMENTATION ORDER (.01) BPS NCPDP FORMATS/

ADDL DOC SEGMENT

(sub-file) (9002313.9223)

NCPDP FIELD NUMBER (.02) BPS NCPDP FORMATS/

ADDL DOC SEGMENT

(sub-file) (9002313.9223)

PROCESSING MODE (.03) BPS NCPDP FORMATS/

ADDL DOC SEGMENT

(sub-file) (9002313.9223)

SPECIAL CODE (1) BPS NCPDP FORMATS/

ADDL DOC SEGMENT

(sub-file) (9002313.9223)

PROGRAMMING NOTES (2) BPS NCPDP FORMATS/

ADDL DOC SEGMENT

(sub-file) (9002313.9223)

FACILITY SEGMENT ORDER (.01) BPS NCPDP FORMATS/

FACILITY SEGMENT

(sub-file) (9002313.9224)

NCPDP FIELD NUMBER (.02) BPS NCPDP FORMATS/

FACILITY SEGMENT

(sub-file) (9002313.9224)

PROCESSING MODE (.03) BPS NCPDP FORMATS/

FACILITY SEGMENT

(sub-file) (9002313.9224)

SPECIAL CODE (1) BPS NCPDP FORMATS/

FACILITY SEGMENT

(sub-file) (9002313.9224)

PROGRAMMING NOTES (2) BPS NCPDP FORMATS/

FACILITY SEGMENT

(sub-file) (9002313.9224)

NARRATIVE SEGMENT ORDER (.01) BPS NCPDP FORMATS/

NARRATIVE SEGMENT

(sub-file) (9002313.9225)

NCPDP FIELD NUMBER (.02) BPS NCPDP FORMATS/

NARRATIVE SEGMENT

(sub-file) (9002313.9225)

PROCESSING MODE (.03) BPS NCPDP FORMATS/

NARRATIVE SEGMENT

(sub-file) (9002313.9225)

SPECIAL CODE (1) BPS NCPDP FORMATS/

NARRATIVE SEGMENT

(sub-file) (9002313.9225)

PROGRAMMING NOTES (2) BPS NCPDP FORMATS/

NARRATIVE SEGMENT

(sub-file) (9002313.9225)

DEFAULT ELIGIBILITY PHARMACY (.08) BPS SETUP (9002313.99)

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

Field Name (Number) File/Subfile Name (Number)

Description of change

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

TRANSACTION ORDER (.01) BPS CLAIMS/TRANSACTIONS

(sub-file) (9002313.0201)

The MEDICATIONS sub-file was renamed to TRANSACTIONS

The MEDICATION ORDER field was renamed to TRANSACTION ORDER

PRESCRIPTION/SERVICE REF NO (402) BPS CLAIMS/TRANSACTIONS

(sub-file) (9002313.0201)

The PRESCRIPTION /SERVICE REF NO. field was renamed to

PRESCRIPTION/SERVICE REF NO

\*SUBMISSION CLARIFICATION CODE (420) BPS CLAIMS/TRANSACTIONS

(sub-file) (9002313.0201)

This field was moved to the SUBMISSION CLARIFICATION MLTPL

(sub-file) (9002313.02354)

ASSOCIATED RX/SERVICE REF NO (456) BPS CLAIMS/TRANSACTIONS

(sub-file) (9002313.0201)

The ASSOCIATED RX SERVICE field was renamed to

ASSOCIATED RX/SERVICE REF NO

PROCEDURE MODIFIER CODE COUNT (458) BPS CLAIMS/TRANSACTIONS

(sub-file) (9002313.0201)

The PROCEDURE MODIFIER COUNT field was renamed to

PROCEDURE MODIFIER CODE COUNT

OTHER AMT CLAIMED SUBMTTD CNT (478) BPS CLAIMS/TRANSACTIONS

(sub-file) (9002313.0201)

The OTHER AMOUNT CLAIM COUNT field was renamed to

OTHER AMT CLAIMED SUBMTTD CNT

PRIOR AUTH SUPPORTING DOCUMNTN (498.13)BPS CLAIMS/TRANSACTIONS

(sub-file) (9002313.0201)

The PRIOR AUTH SUPPORTING INFO field was renamed to

PRIOR AUTH SUPPORTING DOCUMNTN

SUBMISSION CLRFCTN CODE CNTR (.01) BPS CLAIMS/SUBMISSION CLARIFICATION

MLTPL (sub-file) (9002313.02354)

The SUBMISS. CLRFCTN. CODE COUNTER field was renamed to

SUBMISSION CLRFCTN CODE CNTR

SUBMISSION CLARIFICATION CODE (420) BPS CLAIMS/SUBMISSION CLARIFICATION

MLTPL (sub-file) (9002313.02354)

The SUBMISSION CLARIFICATION CODE field Description was changed

OTHER AMT CLAIMED COUNTER (.01) BPS CLAIMS/OTHER AMT CLAIMED MULTIPLE

(sub-file) (9002313.0601)

The PRICING REPEATING FIELDS sub-file was renamed to

OTHER AMT CLAIMED MULTIPLE

The PRICING COUNTER field was renamed to OTHER AMT CLAIMED COUNTER

OTHER AMT CLAIMED SUBMTTD QLFR (479) BPS CLAIMS/OTHER AMT CLAIMED MULTIPLE

(sub-file) (9002313.0601)

The OTHER AMOUNT CLAIMED CODE was renamed to

OTHER AMT CLAIMED SUBMTTD QLFR

OTHER AMOUNT CLAIMED SUBMITTED (480) BPS CLAIMS/OTHER AMT CLAIMED MULTIPLE

(sub-file) (9002313.0601)

The OTHER AMOUNT SUBTOTAL field was renamed to

OTHER AMOUNT CLAIMED SUBMITTED

OTHER PAYER AMT PAID QUALIFIER (.01) BPS CLAIMS/OTHER PAYER AMT PAID

MULTIPLE

(sub-file) (9002313.401342)

The OTHER PAYER AMT PAID QUALIFIER sub-file was renamed to

OTHER PAYER AMT PAID MULTIPLE

The OTHER PAYER AMT PAID QUALIFIER field Description was changed

OTHER PAYER REJECT CODE (.01) BPS CLAIMS/OTHER PAYER REJECT CODE

MLTPL

(sub-file) (9002313.401472)

The OTHER PAYER REJECT CODE sub-file was renamed to OTHER PAYER

REJECT CODE MLTPL

The OTHER PAYER REJECT CODE field Description was changed

TRANSACTION ORDER (.01) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The MEDICATION ORDER field was renamed to TRANSACTION ORDER

NEXT MEDICARE PART D TERM DATE (141) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The NEXT MEDICARE PART D TERM. DT. field was renamed to

NEXT MEDICARE PART D TERM DATE

INGRED COST CNTRCTD REIMB AMT (148) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

This field was changed from 1-11 characters to 1-8 characters

DISP FEE CNTRCTD REIMB AMOUNT (149) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

This field was changed from 1-11 characters to 1-8 characters

BASIS OF CALC-DISPENSING FEE (346) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The BASIS FOR DISPENSING FEE field was renamed to

BASIS OF CALC-DISPENSING FEE

BASIS OF CALC-FLAT SALES TAX (348) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The BASIS FOR FLAT TAX field was renamed to BASIS OF CALC-FLAT SALES TAX

PRESCRIPTION REFERENCE NUMBER (402) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

This field was changed from 1-7 characters to 1-14 characters

PRIOR AUTH NUMBER-ASSIGNED (498.14) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The PRIOR AUTHORIZATION ASSIGNED field was renamed to

PRIOR AUTH NUMBER-ASSIGNED

PRIOR AUTH NO REFILLS AUTHRZD (498.54)BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The PRIOR AUTHORIZED REFILLS field was renamed to

PRIOR AUTH NO REFILLS AUTHRZD

PRIOR AUTH QTY ACCUMULATED (498.55) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The PRIOR AUTH ACCUMULATED QTY field was renamed to

PRIOR AUTH QTY ACCUMULATED

PRIOR AUTHORIZATION QUANTITY (498.57)BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The PRIOR AUTHORIZED QUANTITY field was renamed to

PRIOR AUTHORIZATION QUANTITY

HEADER RESPONSE STATUS (501) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The PRESCRIPTION RESPONSE STATUS field was renamed to

HEADER RESPONSE STATUS

BASIS OF REIMB DETERMINATION (522) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The BASIS OF REIMBURSEMENT field was renamed to

BASIS OF REIMB DETERMINATION

\*ADDITIONAL MESSAGE INFORMATIO (526) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The ADDITIONAL MESSAGE INFORMATION field was moved to the

ADDITIONAL MESSAGE MLTPL (sub-file) (9002313.13001)

PERCENTAGE SALES TAX BASIS PD (561) BPS RESPONSES/RESPONSES

(sub-file) (9002313.0301)

The PERCENTAGE SALES TAX BASIS field was renamed to

PERCENTAGE SALES TAX BASIS PD

BENEFIT STAGE QUALIFIER (393) BPS RESPONSES/BENEFIT STAGE INFO

(sub-file) (9002313.039201)

This field was moved to the BENEFIT STAGE INFO (sub-file)

(9002313.039201)

BENEFIT STAGE AMOUNT (394) BPS RESPONSES/BENEFIT STAGE INFO

(sub-file) (9002313.039201)

This field was moved to the BENEFIT STAGE INFO (sub-file)

(9002313.039201)

PROBER CLAIM (.04) BPS ASLEEP PAYERS (9002313.15)

This field was changed to be a pointer to the BPS TRANSACTION file

(9002313.59). Previously, it was a pointer to the BPS REQUESTS file

(9002313.77).

QUANTITY OF PREVIOUS FILL (531) BPS RESPONSES/DUR PPS

(sub-file) (9002313.1101)

This field was changed from 1-10 characters to 1-12 characters

TYPE (.02) BPS PAYER RESPONSE OVERRIDES

(9002313.32)

The E:ELIGIBILITY code was added to the set of codes values

TRANSACTION TYPE (19) BPS LOG OF TRANSACTION (9002313.57)

The E:ELIGIBILITY code was added to the set of codes values

RX ACTION (1201) BPS LOG OF TRANSACTION (9002313.57)

The RX ACTION Description field was changed to include ELIGIBILITY

requests

B1 PAYER SHEET (902.02) BPS LOG OF TRANSACTION/

PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.57902)

The PAYER SHEET field was renamed to B1 PAYER SHEET

B3 PAYER SHEET (902.21) BPS LOG OF TRANSACTION/

PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.57902)

The B3 REBILL PAYER SHEET field was renamed to B3 PAYER SHEET

TRANSACTION TYPE (19) BPS TRANSACTION (9002313.59)

The E:ELIGIBILITY code was added to the set of codes values

RX ACTION (1201) BPS TRANSACTION (9002313.59)

The RX ACTION Description field was changed to include ELIGIBILITY

requests

B1 PAYER SHEET (902.02) BPS TRANSACTION/

PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.59902)

The PAYER SHEET field was renamed to B1 PAYER SHEET

B3 PAYER SHEET (902.21) BPS TRANSACTION/

PATIENT INSURANCE MULTIPLE

(sub-file) (9002313.59902)

The B3 REBILL PAYER SHEET field was renamed to B3 PAYER SHEET

KEY1 (.01) BPS REQUESTS (9002313.77)

The RX NUMBER field was renamed to KEY1

KEY2 (.02) BPS REQUESTS (9002313.77)

The REFILL NO field was renamed to KEY2

ECME TRANSACTION RECORD (.06) BPS REQUESTS (9002313.77)

The ECME TRANSACTION RECORD Description field was changed.

RX ACTION (1.01) BPS REQUESTS (9002313.77)

The RX ACTION Description field was changed to include ELIGIBILITY

requests

TRANSACTION TYPE (1.04) BPS REQUESTS (9002313.77)

The E:ELIGIBILITY code was added to the set of codes values

DATE OF SERVICE (2.01) BPS REQUESTS (9002313.77)

The DATE OF SERVICE Description field was changed

TRANSACTION ID (.01) BPS INSURER DATA (9002313.78)

The TRANSACTION ID field was changed to allow an ECME number up to

14 digits with 5 decimal digits

B1 PAYER SHEET (.02) BPS INSURER DATA (9002313.78)

The PAYER SHEET field was renamed to B1 PAYER SHEET

B3 PAYER SHEET (.04) BPS INSURER DATA (9002313.78)

The B3 REBILL PAYER SHEET field was renamed to B3 PAYER SHEET

B1 PAYER SHEET NAME (4.01) BPS INSURER DATA (9002313.78)

The PAYER SHEET NAME field was renamed to B1 PAYER SHEET NAME

B3 PAYER SHEET NAME (4.03) BPS INSURER DATA (9002313.78)

The B3 REBILL PAYER SHEET NAME field was renamed to B3 PAYER SHEET NAME

TRANSACTION HEADER ORDER (.01) BPS NCPDP FORMATS/

TRANSACTION HEADER SEGMENT

(sub-file) (9002313.9205)

This field was changed from 1-999 digits to 1-9999 digits

PATIENT SEGMENT ORDER (.01) BPS NCPDP FORMATS/

PATIENT SEGMENT

(sub-file) (9002313.9206)

This field was changed from 1-999 digits to 1-9999 digits

INSURANCE SEGMENT ORDER (.01) BPS NCPDP FORMATS/

INSURANCE SEGMENT

(sub-file) (9002313.9207)

This field was changed from 1-999 digits to 1-9999 digits

CLAIM SEGMENT ORDER (.01) BPS NCPDP FORMATS/

CLAIM SEGMENT

(sub-file) (9002313.9208)

This field was changed from 1-999 digits to 1-9999 digits

PHARMACY PROVIDER ORDER (.01) BPS NCPDP FORMATS/

PHARMACY PROVIDER SEGMENT

(sub-file) (9002313.9209)

This field was changed from 1-999 digits to 1-9999 digits

PRESCRIBER SEGMENT ORDER (.01) BPS NCPDP FORMATS/

PRESCRIBER SEGMENT

(sub-file) (9002313.921)

This field was changed from 1-999 digits to 1-9999 digits

COB OTHER PAYMENTS ORDER (.01) BPS NCPDP FORMATS/

COB OTHER PAYMENTS SEGMENT

(sub-file) (9002313.9213)

This field was changed from 1-999 digits to 1-9999 digits

WORKERS COMP SEGMENT ORDER (.01) BPS NCPDP FORMATS/

WORKERS COMP SEGMENT

(sub-file) (9002313.9214)

This field was changed from 1-999 digits to 1-9999 digits

DUR PPS SEGMENT ORDER (.01) BPS NCPDP FORMATS/

DUR PPS SEGMENT

(sub-file) (9002313.9215)

This field was changed from 1-999 digits to 1-9999 digits

PRICING SEGMENT ORDER (.01) BPS NCPDP FORMATS/

PRICING SEGMENT

(sub-file) (9002313.9216)

This field was changed from 1-999 digits to 1-9999 digits

COUPON SEGMENT ORDER (.01) BPS NCPDP FORMATS/

COUPON SEGMENT

(sub-file) (9002313.9217)

This field was changed from 1-999 digits to 1-9999 digits

COMPOUND SEGMENT ORDER (.01) BPS NCPDP FORMATS/

COMPOUND SEGMENT

(sub-file) (9002313.9218)

This field was changed from 1-999 digits to 1-9999 digits

PRIOR AUTH SEGMENT ORDER (.01) BPS NCPDP FORMATS/

PRIOR AUTH SEGMENT

(sub-file) (9002313.9219)

This field was changed from 1-999 digits to 1-9999 digits

CLINICAL SEGMENT ORDER (.01) BPS NCPDP FORMATS/

CLINICAL SEGMENT

(sub-file) (9002313.922)

This field was changed from 1-999 digits to 1-9999 digits

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

OPTION:

-------

BPS MENU RPT CLAIM STATUS

BPS RPT SPENDING ACCOUNT

BPS UNSTRAND SCREEN

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

Protocol Name

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

BPS PRTCL RSCH ELIG INQ

BPS PRTCL RSCH HIDDEN ACTIONS

BPS PRTCL UNSTRAND ALL

BPS PRTCL UNSTRAND PRINT

BPS PRTCL UNSTRAND SELECT

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

List Template Name

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

BPS LSTMN ECME REOPEN

BPS LSTMN ECME UNSTRAND

BPS LSTMN ECME USRSCR

BPS LSTMN RSCH MENU

Documentation Retrieval:

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

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\_P10\_RN.PDF ECME Release Notes

BPS\_1\_P10\_UM.PDF ECME User Manual

BPS\_1\_P10\_TM.PDF ECME Technical Manual

Test Sites:

-----------

REDACTED

## Pre/Post Installation Overview

There is a pre-install routine associated with this patch named

PRE^BPS10PRE. The purpose of the pre-install routine is to prepare

several files for the reception of new NCPDP D.0 data. The files

affected are BPS CLAIMS (9002313.02), BPS RESPONSES (9002313.03),

BPS NCPDP RESULT OF SERVICE CODE (9002313.22), BPS NCPDP REASON FOR

SERVICE CODE (9002313.23), BPS NCPDP DAW CODE (9002313.24), BPS

NCPDP PRIOR AUTHORIZATION TYPE CODE (9002313.25), BPS NCPDP FIELD

DEFS (9002313.91), and BPS NCPDP REJECT CODES (9002313.93).

There is a post-install routine associated with this patch named

POST^BPS10PST. The purpose of the post-install routine is to:

1. update the BPS REQUESTS (90023213.77), BPS INSURER DATA

(9002313.78) and BPS LOG OF TRANSACTIONS (9002313.57) files

in preparation for Eligibility Verification Requests.

2. copy data in the BPS CLAIMS (90023213.02) and BPS RESPONSES

(9002313.03) files to new structures in preparation for NCPDP

D.0 claims.

3. remove obsolete data and fields from the BPS CERTIFICATION

(9002313.31) and BPS NCPDP FORMATS (9002313.92) files.

4. set the VITRIA INTERFACE VERSION (6003) field of the BPS

SETUP (900313.99) file to 4. A registration message is also

sent to the Financial Services Center (FSC) with this data.

This allows the FSC to know that this patch has been installed.

5. update the Read Access security to be 'Pp' for the BPS NCPDP

PROFESSIONAL SERVICE CODE (9002313.21), BPS NCPDP RESULT OF

SERVICE CODE (9002313.22), BPS NCPDP REASON FOR SERVICE CODE

(9002313.23), BPS NCPDP DAW CODE (9002313.24), BPS PAYER

RESPONSE OVERRIDES (9002313.32), BPS REQUESTS (90023213.77),

and BPS INSURER DATA (9002313.78) files. Changing this

security aligns these file with rest of the ECME files.

Both of these routines are automatically deleted by KIDS if allowed by

your local Kernel parameters configuration. You may delete the BPS10PRE

and BPS10PST routines if the installation was successful and they are not

automatically deleted by KIDS.

## Installation Instructions

Do not queue the installation of this patch.

To avoid disruptions, these patches should be installed during non-peak

hours when there is minimal activity on the system. Avoid times when ECME

claims are being transmitted. Of particular concern would be the options

below.

1. [BPS NIGHTLY BACKGROUND JOB]

Do not install the patch when ECME claims are being generated

by the BPS Nightly Background Job option. Wait for this job to

finish or complete the installation before this job starts.

2. [PSXR SCHEDULED CS TRANS] and

[PSXR SCHEDULED NON-CS TRANS]

Do not install the patch when prescriptions are being

transmitted to CMOP. Wait for the CMOP transmissions to finish

or complete the installation before the transmissions start. Both

the CS (Controlled Substances) and the non-CS CMOP transmission

options should be checked. Check with Pharmacy Service or your

Pharmacy ADPAC to find out when CMOP transmissions occur.

Install Time

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

The installation will take between 10 and 90 minutes depending upon how

many entries your site has in the BPS CLAIMS file (9002313.02) and in the

BPS RESPONSES file (9002313.03). Data conversions will be run in both

files and all entries will be checked during the installation of BPS\*1\*10.

1. OBTAIN PATCHES

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

Obtain the host file BPS\_1\_10\_PSO\_IB\_PRCA.KID, which contains the

following patches:

BPS\*1.0\*10

PSO\*7.0\*359

IB\*2.0\*435

PRCA\*4.5\*271

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\_10\_PSO\_IB\_PRCA.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

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

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\_10\_PSO\_IB\_PRCA.KID (e.g.,

SYS$SYSDEVICE:[ANONYMOUS]BPS\_1\_10\_PSO\_IB\_PRCA.KID).

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

The following will display:

Loading Distribution...

BPS PSO IB PRCA BUNDLE 6.0

BPS\*1.0\*10

PSO\*7.0\*359

IB\*2.0\*435

PRCA\*4.5\*271

Use INSTALL NAME: BPS PSO IB PRCA BUNDLE 6.0 to install this

Distribution.

4. RUN OPTIONAL INSTALLATION OPTIONS FOR MULTI-BUILD

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

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

options (when prompted for the INSTALL NAME, enter

BPS PSO IB PRCA BUNDLE 6.0):

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.

5. 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 PRCA BUNDLE 6.0.

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

install.

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

PRCA BUNDLE 6.0.

c. For the BPS\*1\*10 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. When prompted "Want KIDS to INHIBIT LOGONs during the

install? YES//" enter NO.

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

and Protocols? NO//" enter NO.

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

but do not queue this install.

Note: Routines BPSJPAY and BPSOSR2 are being deleted with this patch.

Routine Information:

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

The second line of each of these routines now looks like:

;;1.0;E CLAIMS MGMT ENGINE;\*\*[Patch List]\*\*;JUN 2004;Build 27

The checksums below are new checksums, and

can be checked with CHECK1^XTSUMBLD.

Routine Name: BPS10PRE

Before: n/a After:B110781269 \*\*10\*\*

Routine Name: BPS10PST

Before: n/a After: B73830145 \*\*10\*\*

Routine Name: BPSBUTL

Before: B54583850 After: B55262641 \*\*1,3,2,5,7,8,9,10\*\*

Routine Name: BPSCT

Before: B1407002 After: B1444523 \*\*1,10\*\*

Routine Name: BPSECA1

Before: B12154283 After: B13940777 \*\*1,5,8,10\*\*

Routine Name: BPSECA8

Before: B7457603 After: B20615528 \*\*1,5,10\*\*

Routine Name: BPSECFM

Before: B10863158 After: B9768202 \*\*1,7,10\*\*

Routine Name: BPSECMP2

Before: B81277814 After: B98781684 \*\*1,5,6,7,8,10\*\*

Routine Name: BPSECMPS

Before: B75418064 After: B98920700 \*\*1,2,5,6,7,10\*\*

Routine Name: BPSECX0

Before: B23106196 After: B35429385 \*\*1,5,8,10\*\*

Routine Name: BPSELG

Before: n/a After: B36086244 \*\*10\*\*

Routine Name: BPSFLD01

Before: B9727334 After: B16636556 \*\*8,10\*\*

Routine Name: BPSJHLT

Before: B65705397 After: B56892816 \*\*1,10\*\*

Routine Name: BPSJPAY

Routine Name: BPSJZPR

Before: B62093577 After: B64959398 \*\*1,10\*\*

Routine Name: BPSMHDR

Before: B2671885 After: B3502481 \*\*1,5,10\*\*

Routine Name: BPSNCPD1

Before: B45314557 After: B45414191 \*\*1,3,5,6,7,8,9,10\*\*

Routine Name: BPSNCPD2

Before: B42415694 After: B62016998 \*\*1,5,6,7,8,10\*\*

Routine Name: BPSNCPD3

Before: B28796956 After: B48711811 \*\*1,5,6,7,8,10\*\*

Routine Name: BPSNCPD4

Before: B43623914 After: B45568614 \*\*6,7,8,10\*\*

Routine Name: BPSNCPD5

Before: B78805427 After: B79985749 \*\*7,8,10\*\*

Routine Name: BPSNCPD6

Before: B39101412 After: B28619607 \*\*7,8,10\*\*

Routine Name: BPSNCPD9

Before: n/a After: B36538508 \*\*10\*\*

Routine Name: BPSNCPDP

Before: B76105402 After: B79480311 \*\*1,3,4,2,5,6,7,8,10\*\*

Routine Name: BPSOS03

Before: B8935735 After: B9935989 \*\*1,5,10\*\*

Routine Name: BPSOS2B

Before: B2390241 After: B2413052 \*\*1,5,10\*\*

Routine Name: BPSOS2C

Before: B1491511 After: B1693824 \*\*1,5,10\*\*

Routine Name: BPSOS57

Before: B16780486 After: B15079066 \*\*1,5,10\*\*

Routine Name: BPSOSC2

Before: B34066005 After: B59488348 \*\*1,5,8,10\*\*

Routine Name: BPSOSCA

Before: B9099682 After: B9122453 \*\*1,5,10\*\*

Routine Name: BPSOSCB

Before: B2743656 After: B2769935 \*\*1,5,10\*\*

Routine Name: BPSOSCC

Before: B26147652 After: B25822348 \*\*1,2,5,8,10\*\*

Routine Name: BPSOSCD

Before: B50726570 After: B76120342 \*\*1,3,2,5,7,8,10\*\*

Routine Name: BPSOSCE

Before: B14075186 After: B12883469 \*\*1,5,7,8,10\*\*

Routine Name: BPSOSCF

Before: B28717442 After: B30098289 \*\*1,5,8,10\*\*

Routine Name: BPSOSH2

Before: B63139845 After:B136482600 \*\*1,5,8,10\*\*

Routine Name: BPSOSHF

Before: B32080446 After: B48018870 \*\*1,5,8,10\*\*

Routine Name: BPSOSIY

Before: B67267504 After: B68639944 \*\*1,3,5,6,7,8,10\*\*

Routine Name: BPSOSIZ

Before: B16026755 After: B13539436 \*\*1,5,7,8,10\*\*

Routine Name: BPSOSL

Before: B6592911 After: B6601315 \*\*1,5,10\*\*

Routine Name: BPSOSO2

Before: B31121702 After: B33642927 \*\*1,3,5,10\*\*

Routine Name: BPSOSQ2

Before: B18999575 After: B16516735 \*\*1,5,7,10\*\*

Routine Name: BPSOSQ4

Before: B46598620 After: B51328615 \*\*1,5,7,10\*\*

Routine Name: BPSOSQA

Before: B9957067 After: B9139209 \*\*1,5,7,8,10\*\*

Routine Name: BPSOSQF

Before: B8536069 After: B7245546 \*\*1,5,7,10\*\*

Routine Name: BPSOSQG

Before: B6928881 After: B6945511 \*\*1,5,10\*\*

Routine Name: BPSOSQL

Before: B22164075 After: B18210044 \*\*1,5,7,10\*\*

Routine Name: BPSOSR2

Routine Name: BPSOSRB

Before: B41392879 After: B37930857 \*\*1,5,7,8,10\*\*

Routine Name: BPSOSRX

Before: B41387461 After: B40198470 \*\*1,5,7,8,10\*\*

Routine Name: BPSOSRX2

Before: B20068937 After: B31124186 \*\*7,8,10\*\*

Routine Name: BPSOSRX3

Before:B105355282 After:B117328424 \*\*7,8,10\*\*

Routine Name: BPSOSRX4

Before: B55754369 After: B57083414 \*\*7,8,10\*\*

Routine Name: BPSOSRX5

Before: B36392851 After: B45774231 \*\*7,8,10\*\*

Routine Name: BPSOSRX6

Before: B25512407 After: B23669366 \*\*7,8,10\*\*

Routine Name: BPSOSRX7

Before: B26288315 After: B43038317 \*\*7,10\*\*

Routine Name: BPSOSRX8

Before: B22051341 After: B22878740 \*\*7,10\*\*

Routine Name: BPSOSS8

Before: B1703935 After: B2236526 \*\*1,5,7,10\*\*

Routine Name: BPSOSSG

Before: B18762002 After: B29948946 \*\*1,5,10\*\*

Routine Name: BPSOSU

Before: B40258951 After: B38973910 \*\*1,2,5,7,10\*\*

Routine Name: BPSOSUC

Before: B6202882 After: B9012826 \*\*1,5,7,10\*\*

Routine Name: BPSPRRX3

Before: B99615569 After:B196212053 \*\*8,10\*\*

Routine Name: BPSPRRX5

Before: B48156542 After: B48238265 \*\*8,10\*\*

Routine Name: BPSPRRX6

Before: B57663596 After: B57670037 \*\*8,10\*\*

Routine Name: BPSRDT1

Before: B23088150 After: B23897746 \*\*1,5,10\*\*

Routine Name: BPSREOP1

Before: B59193506 After: B59523437 \*\*3,7,10\*\*

Routine Name: BPSRES

Before: B93916400 After:B125666033 \*\*3,5,7,8,10\*\*

Routine Name: BPSRPAY

Before: B35245645 After: B33669319 \*\*1,7,10\*\*

Routine Name: BPSRPT0

Before: B22975830 After: B22539987 \*\*1,5,7,10\*\*

Routine Name: BPSRPT1

Before: B52995272 After: B53891828 \*\*1,5,7,8,10\*\*

Routine Name: BPSRPT4

Before: B69467414 After: B76530531 \*\*1,5,7,8,10\*\*

Routine Name: BPSRPT5

Before: B79661218 After:B136990119 \*\*1,3,5,7,8,10\*\*

Routine Name: BPSRPT7

Before: B77430067 After:B105055369 \*\*1,3,5,7,8,10\*\*

Routine Name: BPSRPT8

Before: B84250810 After:B125609567 \*\*1,3,5,7,8,10\*\*

Routine Name: BPSSCR02

Before: B42664540 After: B42496170 \*\*1,3,7,10\*\*

Routine Name: BPSSCR03

Before: B42145046 After: B40126137 \*\*1,5,7,8,10\*\*

Routine Name: BPSSCRLG

Before: B97729982 After:B171520017 \*\*1,5,7,8,10\*\*

Routine Name: BPSSCRRS

Before: B44067784 After: B34060825 \*\*1,3,5,7,8,10\*\*

Routine Name: BPSSCRU2

Before: B41765546 After: B46275468 \*\*1,3,5,10\*\*

Routine Name: BPSSCRU3

Before: B31012225 After: B30414230 \*\*1,5,7,8,9,10\*\*

Routine Name: BPSSCRU5

Before: B62214356 After: B61949980 \*\*1,5,7,8,10\*\*

Routine Name: BPSSCRU6

Before: B18199575 After: B17791929 \*\*3,8,10\*\*

Routine Name: BPSTEST

Before: B68950406 After: B93493261 \*\*6,7,8,10\*\*

Routine Name: BPSUSCR

Before: B1332566 After: B1901475 \*\*1,7,10\*\*

Routine Name: BPSUSCR1

Before: B33759524 After: B52105056 \*\*1,5,7,10\*\*

Routine Name: BPSUSCR2

Before: B9480735 After: B14190168 \*\*7,10\*\*

Routine Name: BPSUSCR4

Before: B12367629 After: B15393480 \*\*1,3,7,10\*\*

Routine Name: BPSUTIL2

Before: B26258660 After: B28691065 \*\*7,8,10\*\*

Routine list of preceding patches: 9

# Enhancements

## Technical Modifications

### 3.1.1 NCPDP Version D.0

ECME was enhanced to send third party claims using the NCPDP Telecommunication Standard version D.0 specifications, which complies with new HIPAA requirements. Backwards compatibility with NCPDP Telecommunication Standard version 5.1 will be maintained until all

third party payers are ready to support version D.0.

### 3.1.2 Eligibility Verification Processing

ECME was enhanced to process Eligibility Verification requests, which will allow the sites to verify pharmacy insurance for patients. The process is initiated either through the new Eligibility Inquiry (ELIG) hidden action on the Further Research menu of the ECME User Screen [BPS USER SCREEN] or through a new IB option called Initiate e-Pharmacy Eligibility Inquiry [IBCNR ELIGIBILITY INQUIRY]. The results of the request will be displayed in the IB Insurance Buffer. Please see IB patch IB\*2.0\*435 for more detailed information on the new IB option and changes to the IB Insurance Buffer.

### 3.1.3 Eligibility Verification Hidden Action

A new hidden action – Eligibility Inquiry (ELIG) – was added to the Further Research Menu of the ECME User Screen [BPS USER SCREEN] to allow users to initiate Eligibility Verification requests for billing requests that are rejected. The user will be prompted for the Relationship Code, Person Code, and Effective Date, which will be included in the data of the Eligibility

Verification Request.

### New ECME Number Length

With NCPDP version D.0, the ECME number has increased in size from 7 characters to 12 characters. To support this change, the following options were updated.

* ECME User Screen [BPS USER SCREEN]
* Rejected Claims Report [BPS RPT REJECTION]
* Payable Claims Report [BPS RPT PAYABLE]
* Reversal Claims Report [BPS RPT REVERSAL]
* Claims Submitted, Not Yet Released [BPS RPT NOT RELEASED]
* Closed Claims Report [BPS RPT CLOSED CLAIMS]
* Recent Transactions [BPS RPT RECENT TRANSACTIONS]
* Process Secondary/TRICARE Rx to ECME [BPS COB PROCESS SECOND TRICARE]
* Reopen Closed Claims action on the ECME User Screen [BPS USER SCREEN]

### 3.1.5 New Fields in Claim Log

The Claim Log (LOG) action on the ECME User Screen [BPS USER SCREEN] was updated to display new NCPDP version D.0 fields that may be returned by the payer in a NCPDP version D.0 response. It was also updated to synchronize the display more closely with the Reject Information screen of the Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST] and the Third Party Payer Rejects - View/Process [PSO REJECTS VIEW/PROCESS] options.

### 3.1.6 Spending Account Report

A new option Spending Account Report [BPS RPT SPENDING ACCOUNT] was added to the Claim Results and Status [BPS MENU RPT CLAIM STATUS] menu to display additional NCPDP version D.0 paid amount information that may be returned by the third party payer in a NCPDP version D.0 response.

### 3.1.7 New Fields in ECME Claims-Response Inquiry

The ECME Claims-Response Inquiry [BPS RPT CLAIMS RESPONSE] option was updated to display additional NCPDP version D.0 fields that are included in the outgoing request and the incoming payer response.

### 3.1.8 Changes to Payer Sheet Detail Report

The Payer Sheet Detail Report [BPS RPT PAYER SHEET DETAIL] was updated to include new NCPDP version D.0 segments and fields that are in version D.0 payer sheets. This report was also modified to remove the display of the Reversal Format, Reversal Sheet, Transaction Count and Certification ID headers and data in the header section of the report. These fields are plan-specific and are no longer maintained with the payer sheets. To see this information, you should view the PLAN information using the appropriate IB option.

### 3.1.9 Changes to Resubmit Claim w/EDITS

The Resubmit Claim w/EDITS (RED) action on the ECME User Screen [BPS USER SCREEN] was updated to prompt the user for the new NCPDP version D0 fields Patient Residence Code, Pharmacy Service Type Code, and Delay Reason Code. In addition, this option was updated to allow the entry of up to three Submission Clarification codes.

### 3.1.10 Changes to BPS Edit Basic ECME Parameters

The BPS Edit Basic ECME Parameters [SETUP BASIC PARAMS] was modified to prompt for the Default Eligibility Pharmacy. This Pharmacy will be placed on the NCPDP Eligibility Verification request when it is initiated by the new option in IB.

### 3.1.11 Changes to Process Secondary/TRICARE Rx to ECME

The Process Secondary/TRICARE Rx to ECME [BPS COB PROCESS SECOND TRICARE] option was modified to support the changes to the list of valid Paid Amount Qualifiers that occurred with the release of NCPDP version D.0. This is also true if a secondary claim is being processed through the Resubmit Claim w/EDITS (RED) action on the ECME User Screen [BPS USER SCREEN].

### 3.1.12 Changes to View/Unstrand Claims Not Completed

The name of the View/Unstrand Claims Not Completed [BPS UNSTRAND SCREEN] option was changed to View/Unstrand Submissions Not Completed to reflect that it also includes Eligibility Verification submissions. The screen was also modified to show each type of transaction (Billing Request, Reversal, and Eligibility Submissions) in its own section with a subheader at the beginning of each section.

### 3.1.13 Changes to Statistics Screen

The Statistics Screen [BPS STATISTICS SCREEN] was modified to include two new categories – one for accepted Eligibility Verification requests and the other for rejected Eligibility Verification requests.

### 3.1.14 Suppression of Eligibility Transmissions on ECME User Screen

The ECME User Screen [BPS USER SCREEN] was updated to suppress the display of Eligibility Verification transmissions.

### 3.1.15 Changes to Claim Results and Status Reports

All of the claims reports on the Claim Results and Status [BPS MENU RPT CLAIM STATUS] menu were updated to not display the results of Eligibility Verification requests.

### 3.1.16 Changes to Turn-Around Time Statistics

The Turn-around time statistics [BPS RPT TURNAROUND STATS] was modified not to display the results of Eligibility Verification requests.

### 3.1.17 Changes to ECME Bulletin

The ECME bulletin, which is sent when ECME claims cannot be processed, was updated to include the site number in the Subject of the mail message.

### 3.1.18 Changes to Insurer Asleep Functionality

The Insurer Asleep functionality used by the NCPDP claims submission process was updated to correct some existing deficiencies and to allow it to function with Eligibility verification submissions.

## Issue Resolutions

### 3.2.1 New Service Requests (NSRs)

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

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

Request Name: e-Pharmacy Phase 5: FY09

Request ID: 20080103

### 3.2.2 Remedy Tickets

There are no Remedy Tickets associated with this patch.