E-Claims Management Engine (ECME)

RELEASE NOTES

BPS*1*8

August 2010

Department of Veterans Affairs
VISTA Health
Systems Design & Development
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1. Introduction

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

<table>
<thead>
<tr>
<th>APPLICATION/VERSION</th>
<th>PATCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integrated Billing (IB) V. 2.0</td>
<td>IB<em>2</em>411</td>
</tr>
<tr>
<td>Electronic Claims Management Engine (ECME) V. 1.0</td>
<td>BPS<em>1</em>8</td>
</tr>
<tr>
<td>Outpatient Pharmacy (OP) V. 7.0</td>
<td>PSO<em>7</em>290</td>
</tr>
</tbody>
</table>

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

DHCP Patch Display

Run Date: SEP 01, 2010  Designation: BPS*1*8
Package : E CLAIMS MGMT ENGINE  Priority : MANDATORY
Version : 1  Status : RELEASED

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

Subject:  ePHARMACY COB SUPPORT
Category:  ROUTINE
          DATA DICTIONARY
Description:

This patch has enhancements which extend the capabilities of the Veterans Health Information Systems and Technology Architecture (VistA) electronic pharmacy (ePharmacy) billing system. Below is a list of all the applications involved in this project along with their patch number:

<table>
<thead>
<tr>
<th>APPLICATION/VERSION</th>
<th>PATCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>OUTPATIENT PHARMACY (OP)</td>
<td>PSO<em>7</em>290</td>
</tr>
<tr>
<td>INTEGRATED BILLING (IB)</td>
<td>IB<em>2</em>411</td>
</tr>
<tr>
<td>ELECTRONIC CLAIMS MGMT ENGINE (ECME)</td>
<td>BPS<em>1</em>8</td>
</tr>
</tbody>
</table>

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

The main purpose of this patch is to implement functionality that supports e-billing of the patients secondary insurance plans. These modifications allow the VA to send additional claims electronically to the patient's secondary insurances in order to reimburse money from those payers that are responsible for the payments but were not billed previously. Thus this enhancement will help VA sites to increase their revenue.

While claims to the Primary insurance companies are sent automatically, the claims to the Secondary insurance companies can now be sent manually by using the new menu option Process Secondary/TRICARE Rx to ECME [BPS COB PROCESS SECOND TRICARE]. The same menu option can also be used to manually generate primary claims if the patient has a dual eligibility (for example, a TRICARE patient has both reimbursable insurance and TRICARE plans with Pharmacy coverage), these cases were not previously handled by the software. With this enhancement patch, duel eligible patients can now be manually billed using the ePharmacy software.

Two new reports are introduced with this patch to support both secondary billing and primary billing for TRICARE patients. The first report, Potential Secondary Rx Claims Report [BPS COB RPT SECONDARY CLAIMS], will identify prescriptions/refills that potentially can be billed to the secondary insurance plans. The second report, Potential TRICARE Claims Report [BPS COB RPT TRICARE CLAIMS], will identify prescriptions/refills for TRICARE patients that potentially can be billed to the TRICARE insurance plans.

All three new menu options are combined together under the new ECME Pharmacy COB [BPS COB MENU] menu:

COB  ECME Pharmacy COB ...
This patch modifies the Electronic Claims Management Engine v1.0 application as described below:

1. ECME engine:
The modifications made in this patch allow:
- the engine to recognize secondary claims and process additional COB (Coordination Of Benefits) fields specific for secondary claims
- the engine to use specific plans and rate types selected by the user
- specific data collected for secondary claims to be stored in the BPS TRANSACTION, BPS LOG OF TRANSACTIONS, BPS CLAIMS and BPS REQUESTS files
- specific data collected for secondary claims to be processed, formatted and included in HL7 messages sent to the payer
- specific entries in the BPS NCPDP FIELD DEFS file (#9002313.91) to be updated in order to process the additional COB fields and transmit them to the secondary payer in the correct format
- COB Indicator information to be returned in the EN^BPSNCPDP API
- the ECME to send reject codes to Outpatient Pharmacy along with the COB indicator so the Pharmacy software can distinguish reject codes returned by secondary and primary payers

The new routine BPSFLD01 was created to store GET, SET and FORMAT code to support processing of the COB fields transmitted to the secondary payers.

The claim status code was adjusted to provide correct status information for secondary and primary claims.

The API DUR1^BPSNCPD3 (ICR #4560) was modified to allow the calling application to specify the COB (payer sequence) indicator of the claim for which it is called and to implement a new format of the array for returned values.

The testing tool was modified to process secondary claims.

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

2.1. Main Display Screen and Further Research Screen modifications.
To distinguish primary and secondary claims displayed on the screen, each status line is supplied with COB indicators: “p” for primary and “s” for secondary claims. Status of another claim associated with the same prescription/refill (if any) is displayed in parenthesis.

9.1 ACETAMINOPHEN 650 12345-4321-22 03/02 102287 1/0113558 W RT DIS/NR p-Reversal accepted
9.2 MEDROXYPROGESTRON 00009-0050-02 02/11 102289 0/0113560 W RT ACT/RL s-Payable (p-Payable)

2.2. The Print Claim Log screen displays a new label to indicate the COB insurance level:
Rx Coordination of Benefits: PRIMARY

2.3. The initial page of the developer log was updated to display the information for the specific claim line selected.
Insurance: COB INSURANCE
Rx Coord of Benefits: Secondary
The subsequent pages are based upon the prescription and fill and are not able to differentiate between insurances. However, a log entry indicating the COB level will be added each time the prescription and fill is processed.

- BPSOSRB-Secondary Insurance
- BPSOSQA-Secondary Insurance

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

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

4. Resubmit Claims and Resubmit claims w/EDITS (RED) functionality:
The primary claim cannot be resubmitted if there is a payable secondary claim. In such a case the user shall be advised to reverse the secondary claim first.

   1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT ACT/RL
Are you sure?(Y/N)? y YES
The claim:
1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT ACT/RL
cannot be Resubmitted if the secondary claim is payable.
Please reverse the secondary claim first.

5. Send to Worklist functionality:
The ECME software was modified to
- allow secondary claims to be sent to the Pharmacy Worklist manually from the User Screen,
- send Refill Too Soon and DUR rejects for secondary claims to the Pharmacy Worklist automatically.

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

7. ECME Claims-Response Inquiry [BPS RPT CLAIMS RESPONSE] report:
The report reflects new COB data sent in secondary claims.

8. ECME Potential Secondary Rx Claims Report [BPS COB RPT SECONDARY CLAIMS]:
This new report returns all primary prescription claims, whether processed electronically or paper, that has possible secondary insurance identified in the patient insurance file.

9. Potential TRICARE Claims Report [BPS COB RPT TRICARE CLAIMS]:
This new report returns prescriptions that have not yet been billed for any patient who has an active insurance plan with a type of plan = TRICARE and who has a dual eligibility (veteran and TRICARE) and whose prescription Rx Patient Status is not exempt for TRICARE Billing. This report also includes prescriptions for patients who have TRICARE only in case of the system not being available and the prescription not being processed automatically by ECME.
10. Process Secondary/TRICARE Rx to ECME [BPS COB PROCESS SECOND TRICARE]:
The new option was introduced to process the claims identified on the new reports. This option will submit the claim to ECME and also can be used to resubmit the claim when the user needs to change data specific for secondary claims. Any other processing on this claim can be done through the existing actions available on the ECME User Screen.

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

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

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

If the primary payer paid the primary claim:
- Other Payer Amount Paid Qualifier (mult)
- Other Payer Amount Paid (mult)

If the primary payer rejected the primary claim:
- Other Payer Reject Codes (mult)

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

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

11. COB indicators for Pharmacy Activity log entries:
ECME code was modified to add COB indicators to Pharmacy Activity log when the claim is resubmitted via User Screen actions "Resubmit Claim" and "Reverse Payable Claim w/EDITS" and also when it is reversed manually via "Reverse Payable Claim" action or automatically by ECME nightly processing job (auto reversals).

This patch addresses the following New Service Request (NSR):
---
There is no NSR associated with this patch.
---

This patch addresses the following Remedy Tickets:
---
1. HD374000 Inability to reverse TRICARE claims
2. HD374001 Incorrect Rx cost calculation for TRICARE claims

Overview of Remedy Tickets:
---------------------------
1. HD374000 Inability to reverse TRICARE claims

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

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

2. HD374001 Incorrect Rx cost calculation for TRICARE claims

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

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

Components Sent With Patch
--------------------------
The following is a list of files and fields included in this patch:

<table>
<thead>
<tr>
<th>FILE #</th>
<th>FILE NAME</th>
<th>UP</th>
<th>SEND</th>
<th>DATA</th>
<th>USER</th>
<th>DATE</th>
<th>SEC.</th>
<th>COMES</th>
<th>OVER</th>
<th>W/FILE</th>
<th>RIDE</th>
</tr>
</thead>
<tbody>
<tr>
<td>9002313.02</td>
<td>BPS CLAIMS</td>
<td>YES</td>
<td>NO</td>
<td>NO</td>
<td>NO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Partial DD: subDD: 9002313.02 fld: .08
| subDD: 9002313.0401 fld: 443 |
| 9002313.57 | BPS LOG OF TRANSACTIONS    | YES| NO   | NO   | NO   |      |      |       |      |        |      |
| Partial DD: subDD: 9002313.57 fld: 1204
| fld: 1205 |
| subDD: 9002313.5714
| subDD: 9002313.57902 fld: 902.28
| fld: 902.29
| fld: 902.3
| fld: 902.31
| fld: 902.32
| fld: 902.33 |
| 9002313.59 | BPS TRANSACTION            | YES| NO   | NO   | NO   |      |      |       |      |        |      |
| Partial DD: subDD: 9002313.59 fld: 1204
| fld: 1205 |
| subDD: 9002313.5914
| subDD: 9002313.59902 fld: 902.28
| fld: 902.29 |
The following is a list of options included in this patch:

<table>
<thead>
<tr>
<th>Option Name</th>
<th>Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>BPS COB MENU</td>
<td>SEND TO SITE</td>
</tr>
<tr>
<td>BPS COB PROCESS SECOND TRICARE</td>
<td>SEND TO SITE</td>
</tr>
<tr>
<td>BPS COB RPT SECONDARY CLAIMS</td>
<td>SEND TO SITE</td>
</tr>
<tr>
<td>BPS COB RPT TRICARE CLAIMS</td>
<td>SEND TO SITE</td>
</tr>
<tr>
<td>BPSMENU</td>
<td>USE AS LINK FOR MENU ITEMS</td>
</tr>
</tbody>
</table>

Documentation Retrieval:

Sites may retrieve documentation in one of the following ways:

1. The preferred method is to FTP the files from download.vista.med.va.gov, 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: ftp.fo-albany.med.va.gov
   - Hines: ftp.fo-hines.med.va.gov
   - Salt Lake City: ftp.fo-slc.med.va.gov

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:

<table>
<thead>
<tr>
<th>FILE NAME</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>bps_1_p8_rn.pdf</td>
<td>ECME Release Notes</td>
</tr>
<tr>
<td>bps_1_p8_um.pdf</td>
<td>ECME User Manual</td>
</tr>
<tr>
<td>bps_1_p8_tm.pdf</td>
<td>ECME Technical Manual</td>
</tr>
</tbody>
</table>

Test Sites:

Phoenix
Loma Linda
Tennessee Valley
Kansas City

To avoid disruptions, these patches should be installed when users are not on the system and during non-peak hours. Of particular concern would
be the items below.

1. Do not install the patch when ECME claims are being generated by the BPS Nightly Background Job option [BPS NIGHTLY BACKGROUND JOB]. Wait for this job to finish or complete the installation before this job starts.

2. Do not install the patch when prescriptions are being transmitted to CMOP. Wait for the CMOP transmission to finish or complete the installation before the transmission starts. Check with Pharmacy Service or your pharmacy Automated Data Processing Application Coordinator (ADPAC) to find out when CMOP transmissions occur.

Install Note: Because of the updating entries for the file (#9002313.91) BPS NCPDP FIELD DEFS, during the install you will see the following messages

Starting post-install of BPS*1*8

updating data for the NCPDP field# 337...
updating data for the NCPDP field# 338...
updating data for the NCPDP field# 339...
updating data for the NCPDP field# 340...
updating data for the NCPDP field# 341...
updating data for the NCPDP field# 342...
updating data for the NCPDP field# 431...
updating data for the NCPDP field# 443...
updating data for the NCPDP field# 471...
updating data for the NCPDP field# 472...
updating data for the NCPDP field# 473...
updating data for the NCPDP field# 481...
updating data for the NCPDP field# 483...

14 entries have been updated successfully

Install Time - Approximately less than 5 minutes

1. OBTAIN PATCHES

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

Obtain the host file BPS_1_8_PSO_IB.KID, which contains the following three patch installs:

BPS*1.0*8
PSO*7*290
IB*2.0*411

Sites can retrieve VistA software from the following FTP addresses. The preferred method is to FTP the files from:

download.vista.med.va.gov

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 ftp.fo-albany.med.va.gov
Hines ftp.fo-hines.med.va.gov
Salt Lake City ftp.fo-slc.med.va.gov

The BPS_1_8_PSO_IB.KID host file is located in the anonymous.software directory. Use ASCII Mode when downloading the file.

2. START UP KIDS

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

Start up the Kernel Installation and Distribution System Menu option
[XPD MAIN]:

Edits and Distribution ...
Utilities ...
Installation ...

Select Kernel Installation & Distribution System Option: INStallation

---

Load a Distribution
Print Transport Global
Compare Transport Global to Current System
Verify Checksums in Transport Global
Install Package(s)
Restart Install of Package(s)
Unload a Distribution
Backup a Transport Global

Select Installation Option:

3. LOAD TRANSPORT GLOBAL FOR MULTI-BUILD
-----------------------------------------

From the Installation menu, select the Load a Distribution option. When prompted for "Enter a Host File:", enter the full directory path where you saved the host file BPS_1_8_PSO_IB.KID (e.g., SYS$SYSDEVICE:[ANONYMOUS]BPS_1_8_PSO_IB.KID).

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

The following will display:

Loading Distribution...

BPS PSO IB BUNDLE 4.0
BPS*1.0*8
PSO*7.0*290
IB*2.0*411
Use INSTALL NAME: BPS PSO IB BUNDLE 4.0 to install this Distribution.

7. RUN OPTIONAL INSTALLATION OPTIONS FOR MULTI-BUILD
------------------------------------------------------

From the Installation menu, you may select to use the following options (when prompted for the INSTALL NAME, enter BPS PSO IB BUNDLE 4.0):

a. Backup a Transport Global - This option will create a backup message of any routines exported with this patch. It will not backup any other changes such as DD's or templates.

b. Compare Transport Global to Current System - This option will allow you to view all changes that will be made when this patch is installed. It compares all components of this patch (routines, DD's, templates, etc.).

c. Verify Checksums in Transport Global - This option will allow you to ensure the integrity of the routines that are in the transport global.

8. INSTALL MULTI-BUILD
------------------------

This is the step to start the installation of this KIDS patch. This will need to be run for the BPS PSO IB BUNDLE 4.0.

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

b. When prompted for the "Select INSTALL NAME:", enter BPS PSO IB BUNDLE 4.0.

c. For the BPS*1*8 patch, when prompted "Want KIDS to Rebuild Menu Trees Upon Completion of Install? YES//" enter YES unless your system does this in a nightly TaskMan process.
d. For the PSO*7*290 patch, when prompted "Want KIDS to Rebuild Menu Trees Upon Completion of Install? YES/" enter YES unless your system does this in a nightly TaskMan process.
e. For the IB*2*411 patch, when prompted "Want KIDS to Rebuild Menu Trees Upon Completion of Install? YES/" enter YES unless your system does this in a nightly TaskMan process.
f. When prompted "Want KIDS to INHIBIT LOGONs during the install? YES/" enter NO.
g. When prompted "Want to DISABLE Scheduled Options, Menu Options, and Protocols? YES/" enter YES.
h. When prompted "Enter options you wish to mark as 'Out Of Order':" enter the following options:

- Billing Clerk's Menu [IB BILLING CLERK MENU]
- Billing Supervisor Menu [IB BILLING SUPERVISOR MENU]
- Patient Insurance Menu [IBCNR INSURANCE MGMT MENU]
- e-Pharmacy Menu [IBCNR E-PHARMACY MENU]
- ECME Billing Events Report option [IB ECME BILLING EVENTS ]
- ECME [BPSMENU]
- ECME User Screen [BPS SRVR USER SCREEN]
- Rx (Prescriptions) [PSO RX]
- ePharmacy Menu [PSO EPHARMACY MENU]
- Suspense Functions [PSO PND]

i. When prompted "Enter protocols you wish to mark as 'Out Of Order':" enter <return>.
j. When prompted "Delay Install (Minutes): (0-60): 0/" enter an appropriate number of minutes to delay the installation in order to give users enough time to exit the disabled options before the installation starts.
k. When prompted "Device: Home/" respond with the correct device.

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

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

Routine Information:
====================

The checksums below are new checksums, and can be checked with CHECK1^XTSUMBLD.

Routine Name: BPS10P8
Before: n/a After: B14241991 **8**
Routine Name: BPSBCKJ
Before: B46863482 After: B49753700 **1,2,5,7,8**
Routine Name: BPSBUTL
Before: B52438241 After: B54102124 **1,3,2,5,7,8**
Routine Name: BPSECAC
Before: B9994271 After: B12154283 **1,5,8**
Routine Name: BPSECMP2
Before: B65381768 After: B81277814 **1,5,6,7,8**
Routine Name: BPSECX0
Before: B4171802 After: B23106196 **1,5,8**
Routine Name: BPSFLD01
Before: n/a After: B9727334 **8**
Routine Name: BPSNCPD1
Before: B46831868 After: B44878746 **1,3,5,6,7,8**
Routine Name: BPSNCPD2
Before: B37810791 After: B42415694 **1,5,6,7,8**
Routine Name: BPSNCPD3
Before: B28795294 After: B28796956 **1,5,6,7,8**
Routine Name: BPSNCPD4
Before: B40771134 After: B43623914 **6,7,8**
Routine Name: BPSNCPD5
Before: B64980990 After: B78805427 **7,8**
Routine Name: BPSNCPO6  
Before: B36903046  
After: B39101412  **7,8**
Routine Name: BPSNCPO8  
Before: B54845917  
After: B76105482  **1,3,4,2,5,6,7,8**
Routine Name: BPSOS6M  
Before: B10068430  
After: B11510665  **1,5,8**
Routine Name: BPSOS6C2  
Before: B29561871  
After: B34066085  **1,5,8**
Routine Name: BPSOSCD  
Before: B38794587  
After: B50726570  **1,3,2,5,7,8**
Routine Name: BPSOSCE  
Before: B13588896  
After: B14075186  **1,5,7,8**
Routine Name: BPSOSCF  
Before: B26940349  
After: B28717442  **1,5,8**
Routine Name: BPSOSH2  
Before: B26441893  
After: B36139845  **1,5,8**
Routine Name: BPSOSHF  
Before: B11141582  
After: B32080446  **1,5,8**
Routine Name: BPSOSIY  
Before: B55797518  
After: B67267504  **1,3,5,6,7,8**
Routine Name: BPSOSIZ  
Before: B14362353  
After: B16026755  **1,5,7,8**
Routine Name: BPSOSQA  
Before: B84952790  
After: B99570672  **1,5,7,8**
Routine Name: BPSOSRB  
Before: B39286741  
After: B41392879  **1,5,7,8**
Routine Name: BPSOSRX  
Before: B40176170  
After: B41387461  **1,5,7,8**
Routine Name: BPSOSRX2  
Before: B19493151  
After: B20068937  **7,8**
Routine Name: BPSOSRX3  
Before: B60862491  
After: B105355282  **7,8**
Routine Name: BPSOSRX4  
Before: B38981734  
After: B55754369  **7,8**
Routine Name: BPSOSRX5  
Before: B30559001  
After: B36392851  **7,8**
Routine Name: BPSOSRX6  
Before: B25462490  
After: B25512407  **7,8**
Routine Name: BPSOSRX7  
Before: n/a  
After: B99076770  **8**
Routine Name: BPSOSRX8  
Before: n/a  
After: B12437252  **8**
Routine Name: BPSOSRX9  
Before: n/a  
After: B8324629  **8**
Routine Name: BPSOSRX10  
Before: n/a  
After: B99615569  **8**
Routine Name: BPSOSRX11  
Before: n/a  
After: B15420214  **8**
Routine Name: BPSOSRX12  
Before: n/a  
After: B48156542  **8**
Routine Name: BPSOSRX13  
Before: n/a  
After: B57663596  **8**
Routine Name: BPSOSRES  
Before: B66886236  
After: B39101412  **3,5,7,8**
Routine Name: BPSRPRI  
Before: B52862138  
After: B52995272  **1,5,7,8**
Routine Name: BPSRPRT4  
Before: B67485446  
After: B69467414  **1,5,7,8**
Routine Name: BPSRPRT5  
Before: B72711123  
After: B79661218  **1,3,5,7,8**
Routine Name: BPSRPRT6  
Before: B59574231  
After: B66621847  **1,3,5,7,8**
Routine Name: BPSRPRT7  
Before: B77806502  
After: B77430067  **1,3,5,7,8**
Routine Name: BPSRPRT8  
Before: B84250810  
After: B84250810  **1,3,5,7,8**
Before: n/a       After: B81558879 **8**
Routine Name: BPSRPT9A
Before: n/a       After: B71706588 **8**
Routine Name: BPSSCR03
Routine Name: BPSSCR03
Before: B48894943 After: B42145046 **1,5,7,8**
Routine Name: BPSSCRLG
Before: B95335082 After: B97729982 **1,5,7,8**
Routine Name: BPSSCR8S
Before: B34449344 After: B44067784 **1,3,5,7,8**
Routine Name: BPSSCRRV
Before: B37049932 After: B40545723 **1,5,6,7,8**
Routine Name: BPSSCRU3
Before: B30240821 After: B30637579 **1,5,7,8**
Routine Name: BPSSCRU5
Before: B61189921 After: B62214356 **1,5,7,8**
Routine Name: BPSSCRU6
Before: B5485845 After: B18199575 **3,8**
Routine Name: BPTEST
Before: B58349994 After: B68950406 **6,7,8**
Routine Name: BPUSLIL2
Before: B11085686 After: B26258660 **7,8**
Routine Name: BPUSRLS
Before: B27286584 After: B31684663 **7,8**
Routine list of preceding patches: 7

=================================================================
User Information:
Entered By : ZEIGLER, EDWARD L  Date Entered : OCT 25, 2007
Completed By: TORRANCE, LORI  Date Completed: SEP 1, 2010
Released By : Date Released :
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3. **Enhancements**

3.1. **Technical Modifications**

3.1.1 **ECME Engine**

The modifications made in this patch allow:

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

3.1.2 **ECME User Screen Modifications**

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

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

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

- BPSOSRB-Secondary Insurance
- BPSOSQA-Secondary Insurance

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

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

3.1.4 Resubmit Claims and Resubmit Claims w/EDITS (RED) Functionality
The primary claim cannot be resubmitted if there is a payable secondary claim. In such a case the user shall be advised to reverse the secondary claim first.

- 1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT
  ACT/RL Are you sure? (Y/N)? y YES
  The claim:
- 1.12 FLURAZEPAM 15MG C 00140-0065-14 03/04 102322$ 2/0113596 W RT
  ACT/RL cannot be Resubmitted if the secondary claim is payable.
  Please reverse the secondary claim first

3.1.5 Send to Worklist Functionality
The ECME software was modified to:

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

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

3.1.7 ECME Claims-Response Inquiry [BPS RPT CLAIMS RESPONSE] Report
The report reflects new COB data sent in secondary claims.
3.1.8 ECME Potential Secondary Rx Claims Report [BPS COB RPT SECONDARY CLAIMS]

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

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

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

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

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

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

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

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

If the primary payer paid the primary claim:

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

If the primary payer rejected the primary claim:

- Other Payer Reject Codes (mult)

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

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

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

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

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

3.2.1 HD374000 Inability to Reverse TRICARE Claims
Problem: VA Eastern Kansas HCS reported they are unable to reverse electronic TRICARE claims through the ECME user screen. They are getting a message stating: “The claim: ... is TRICARE claim and cannot be Reversed.”

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

3.2.2 HD374001 Incorrect Rx Cost Calculation for TRICARE Claims
Problem: VA Eastern Kansas HCS reported that the billing software is incorrectly calculating the prescription cost for ECME claims in cases where the drug is using the NCPDP QUANTITY MULTIPLIER field. The billing software is calculating the cost based on the NCPDP quantity rather than the dispensed quantity.

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