



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Pharmacy Point of Sale

(ABSP)

Addendum to User Manual

Version 1.0 Patch 54
October 2024

Office of Information Technology
Division of Information Resource Management

Table of Contents

1.0	Introduction	1
1.1	Summary of Changes	1
2.0	Patch 54 Details	3
2.1	Private Insurance Eligibility Check	3
2.2	Patient Preferred Name (PPN).....	5
	Acronym List	8
	Contact Information	9

1.0 Introduction

This document provides information for the user pertaining to software enhancements and minor corrections included in Pharmacy Point of Sale (ABSP) v1.0 p54.

Please distribute this addendum to your pharmacy billing staff prior to patch installation.

1.1 Summary of Changes

FID77362-A correction was made to the Collection Productivity Report to prevent the following programming error: <UNDEFINED>WRITE+9^ABSPOSUU. This error was caused by a user-specified date being randomly overwritten within the code.

FID77369-A correction was made to the Rejected Claims by Reject Code report and to the Enhanced Rejected Claims by Reject Code report to allow for sending the reports to a printer. The ability to export these reports to a Host File Server was added in ABSP*1.0*52, which inadvertently broke the ability to send them to a printer.

FID75525-The Test it (send claim, receive response) option was removed from the Pharmacy POS application. This option has been unusable for several years and is no longer needed.

FID77888-Several fields in the Claims Data Entry Screen that display a patient name were updated to also display a Patient Preferred Name (PPN) if a preferred name is populated on page 7 of Patient Registration and if the PPN display parameter is turned on.

FID82469-A change was made to the Private Insurance Eligibility Check option to ensure that the patient's social security number is used when sending an eligibility check to Optum. Prior to p54, sites reported that they were receiving the following response when using the PRIV option: CARDHOLDER IS NOT A VALID SSN, LAST 4 OF SSN or MBI.

FID85126-A correction was made to the claims processing routines to prevent the following programming error when a claim response file containing blank spaces is received from Optum: <SUBSCRIPT>REPADM+14^ABSPOSH6. This error caused the claims processing screen to freeze up or get stuck in a status of 'waiting for response'.

FID109802-The ABSP Insurer file was updated to ensure that the default value populated in the RX - DIAL OUT TO field is set to HTTP POST rather than Envoy Direct Via T1 Line.

FID109803-The conversion utility that updates the CONNECTION TYPE in the ABSP DIAL OUT file was corrected to use the HTTP POST entry rather than entry number 10. Entry 10 isn't always the HTTP POST entry.

FID108989-The Medicare Part D Eligibility option and the Private Insurance Eligibility Check option were reactivated and updated with the new Optum submission protocol released in p53 (HTTP POST).

2.0 Patch 54 Details

2.1 Private Insurance Eligibility Check

The Private Insurance Eligibility Check option was updated to address the following rejection being received from Optum: CARDHOLDER IS NOT A VALID SSN, LAST 4 OF SSN, OR MBI.

The Private Insurance Eligibility Check option was released in ABSP v1.0 p52 and is located on the Pharmacy electronic claims reports menu (Pharmacy POS User Menu > RPT > PRIV).

When a private insurance eligibility check is sent to Optum, the PRIV option will first send the cardholder's Social Security Number (SSN). If there is not a SSN present in patient registration, the policy ID number associated with the patient's first private insurance entry will be sent. If there is not a policy ID number present in the patient record, the PRIV option will look to see if there is another private insurance coverage in patient registration.

If there isn't a SSN present in patient registration and there isn't private insurance coverage for the date of service entered, a message will be displayed and the user will be exited from the PRIV option.

```
Select Pharmacy electronic claims reports Option: PRIV Private Ins Eligibility
Check

Accept the default current date of SEP 17, 2024 or
Enter a date between JUN 19, 2024 and DEC 16, 2024

Enter Service Date: SEP 17,2024// (SEP 17, 2024)

Generate eligibility chk (Private Insurance) for which patient? PATIENT, DEMO
                                M 01-01-1970                                TST 43566

Patient does not have any eligible Private Insurers or SSN. Exiting.
```

Figure 2-1: Message received if patient does not have a SSN or private insurance coverage in patient registration

The first time an eligibility check is sent for a patient and Optum finds coverage, a response similar to the example below will be displayed.

```
Select Pharmacy electronic claims reports Option: PRIV Private Ins Eligibility
Check

Accept the default current date of SEP 13, 2024 or
Enter a date between JUN 15, 2024 and DEC 12, 2024

Enter Service Date: SEP 13,2024// (SEP 13, 2024)
```

```
Generate eligibility chk (Private Insurance) for which patient? DEMO,PATIENT
U 01-01-1980 XXX-XX-1234 TST 999330
```

```
Please specify the pharmacy: DEMO CLINIC// DEMO CLINIC
```

```
Transmitting eligibility check, please stand by.....
```

```
Send report to device: HOME// Virtual
```

```
On:                SEP 13, 2024@10:18:33
Patient Name:      DEMO,PATIENT
Member Number:     1234
Status:            A
Authorization #:
```

PATIENT INFORMATION:

```
LAST NAME       : DEMO
FIRST NAME      : PATIENT
DOB             : JAN 01, 1980
```

PRIVATE INSURANCE INFORMATION

```
Insurance Level : 0
BIN             : 001234
PCN            : ABCDEF
GROUP          : 123456
CARDHOLDER ID : 123456789
PERSON CODE    :
PHONE NUMBER   : 555-555-5555
CONTRACT ID    : 12345678
RX BENEFIT PLAN : 158
EFFECTIVE DATE : JAN 01, 2024
TERMINATION DATE:
LOW-INCOME COST : N
FORMULARY ID   :
```

OTHER COVERAGE INFORMATION

```
Secondary Coverage
None
Tertiary Coverage
None
```

Figure 2-2: PRIV results when eligibility found, first inquiry

If an eligibility search has been done in the past for a patient and Optum finds coverage, a response similar to the example below will be displayed.

```
A check was previously submitted for this patient:
On:                SEP 13, 2024@10:18:33
Patient Name:      DEMO,PATIENT
Member Number:     1234
Status:            A
Authorization #:
```

Figure 2-3: PRIV results when eligibility found, subsequent inquiry

If Optum is unable to find coverage for a patient, a response similar to the example below will be displayed.

```

On:                SEP 13, 2024@10:18:33
Patient Name:     DEMO,PATIENT
Member Number:    1234
Status:           R
Authorization #:
Result:           ERX108 Patient Not Found
    
```

Figure 2-4: PRIV results when eligibility not found

2.2 Patient Preferred Name (PPN)

Several fields in the Claims Data Entry Screen that display a patient’s name were updated to allow for displaying a Patient Preferred Name (PPN) if a preferred name is populated on page 7 of Patient Registration and if the PPN display parameter is turned on. This change was made to accommodate the regulation for Certified Health Information Technology from the Office of the National Coordination for Health Information Technology, which requires all Electronic Health Record systems to allow users to record, change, and access structured data on Sexual Orientation and Gender Identity.

The PPN display parameter was released in March 2024 via AUPN v99.1 p29. Please refer to the PPN Implementation Guide for instructions on setting the display parameter to Yes.

<https://www.ihs.gov/rpms/packagedocs/AUPN/aupn9910.29im.pdf>

The Preferred Name field is located on page 7 of Patient Registration.

```

IHS REGISTRATION EDITOR (page 7)                2021 DEMO HOSPITAL
=====
DEMO, PENELOPE - PENNY*                        HRN:1111 CHS & DIRECT
=====
                                Death Info/Other Names
1.          DATE OF DEATH :
2.          STATE OF DEATH :
3. DEATH CERTIFICATE NO. :
----- Other Names -----
4.          OTHER NAMES :
5.          PREFERRED NAME : PENNY
----- Legal Names -----
CHANGED TO          BY    PROOF          DOC. #          DATE
6. <NO LEGAL NAME CHANGES ON FILE>
=====
Last edited by: USER,ONE on Jan 11, 2024
=====
CHANGE which item? (1-6) NONE// :
    
```

Figure 2-5: Preferred Name field on page 7 of Patient Registration

When the PPN display parameter is turned on, the patient’s name will be displayed in the Claims Data Entry Screen followed by a dash, the preferred name, and an asterisk. The preferred name will not be sent to payers or included on any reports. It will only be displayed to the user and is intended to be informational so that the patient can be addressed with his/her preferred name.

```

Enter ?? for more actions >>>
NEW Send new claims DIS Dismiss patient RCA Request cancellation
CU Continuous update SP Print single patient REV Reverse a paid claim
CLO Close Claim PA Print all RES Resubmit a claim
EV Edit view screen LOG Print claim log REC Print receipt/DUR info
Select Action:UD// EV Edit view screen

Display for 1:One user or 2:All users or 3:One patient? : (1/2/3): 1// 3
One patient

Prescriptions for which patient? DEMO,PENELOPE
U 07-17-1980 XXX-XX-4444 TST 123456

Enter the number of DAYS to go back to find
Point of Sale activity for DEMO,PENELOPE - PENNY*

Number of days: 30//

Settings have been changed.
Done

PHARMACY POINT OF SALE Feb 02, 2024 10:34:14 Page: 1 of 1
All prescriptions for patient DEMO,PENELOPE - PENNY*
With activity in the past 30 da

# PATIENT/PRESCRIPTION COMMENTS
1 done DEMO,PENELOPE - PENNY* ** FINISHED ** payable **
2 IBUPROFEN 800MG TABLET JAN 12@16:21, FILL DEC 1,202

Enter ?? for more actions >>>
NEW Send new claims DIS Dismiss patient RCA Request cancellation
CU Continuous update SP Print single patient REV Reverse a paid claim
CLO Close Claim PA Print all RES Resubmit a claim
EV Edit view screen LOG Print claim log REC Print receipt/DUR info
Select Action:UD//
    
```

Figure 2-6: PPN displayed in the EV option of the Claims Data Entry Screen

Within the Claims Data Entry Screen, the following options will also display the patient preferred name: Send new claims (NEW), Close Claim (CLO), and Dismiss patient (DIS). Each option will display a PPN similar to the example below.

```

Enter ?? for more actions >>>
Select Action:UD// CLO Close Claim
Select the line(s) with the claim(s) you wish to CLOSE
    
```

```
Select item(s): (1-2): 2
You have selected to close the following claim
Prescription #1717003 (ABSP59=1717003.00001)
Patient: POS,CAREMARK - HENRY*
```

Figure 2-7: Preferred name displayed in the CLO option

If the PPN display parameter is blank or set to No, the PPN will only be displayed in patient lookup results. It will not be displayed within the Claims Data Entry Screen.

Acronym List

Acronym	Term Meaning
IHS	Indian Health Service
AUPN	IHS Dictionaries (Patient)-an RPMS application
HFS	Host File Server
FID	Feature ID-a number assigned to a software change request
IHS	Indian Health Service
IT	Information Technology
POS	Point of Sale
PPN	Patient Preferred Name
RPMS	Resource and Patient Management System
SSN	Social Security Number

Contact Information

If you have any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

Phone: (888) 830-7280 (toll free)

Web: <https://www.ihs.gov/itsupport/>

Email: itsupport@ihs.gov