



Training

Point of Sale

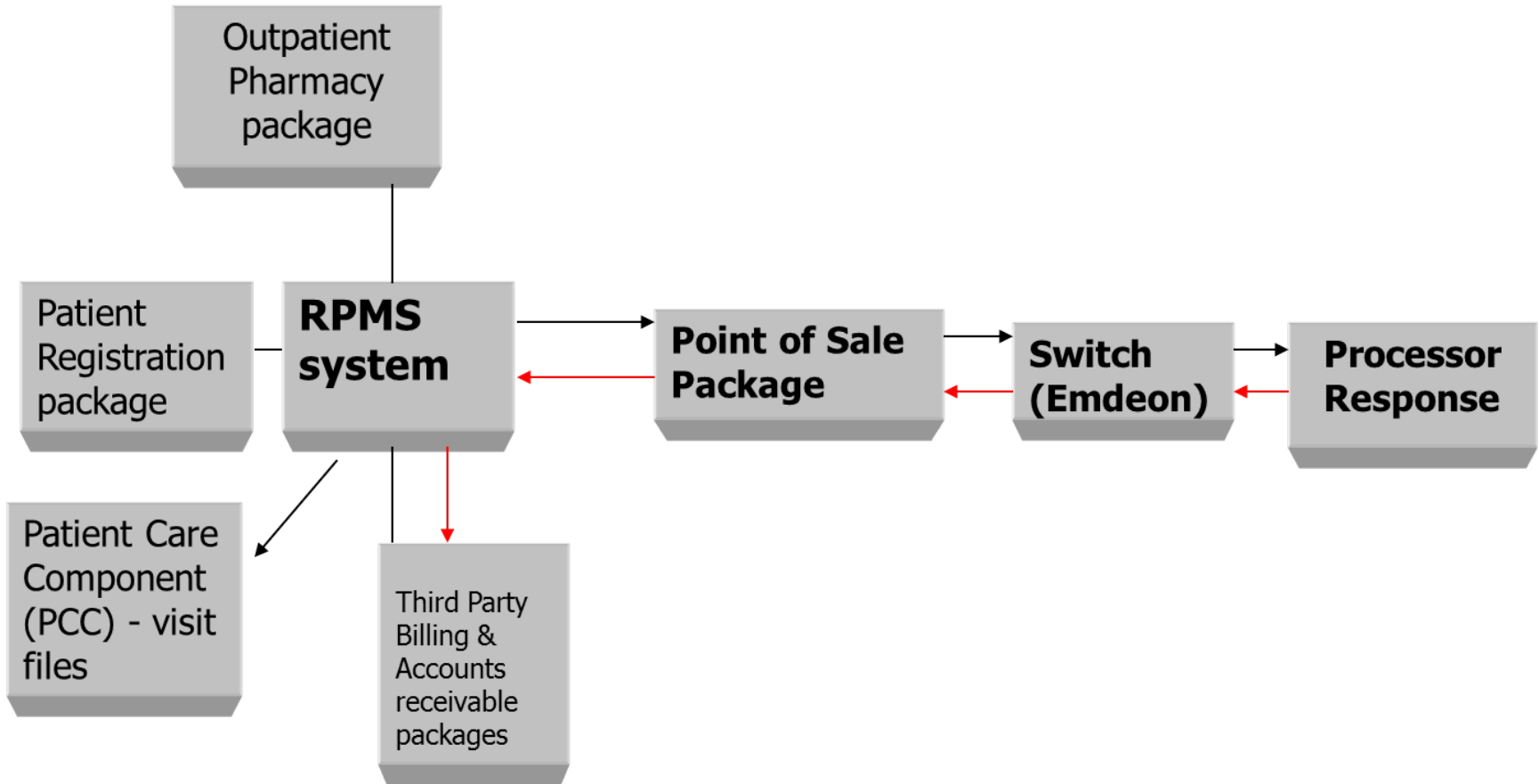
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Adapted from a presentation by Ivanne L. Chiovoloni,
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Point of Sale Pharmacy Billing Revenue Cycle



POS Logistics

- Departmental Coordination
 - Registration
 - Pharmacy
 - Business Office
 - Information and Technology
- Keep Current with Patches
- Drug File Clean-up
- Assigning Necessary Keys
- Point of Sale “turned on”
 - PIHS/IHS Pharmacy Site Parameters
 - *Pass DATA TO POS: YES//*

Necessary Keys

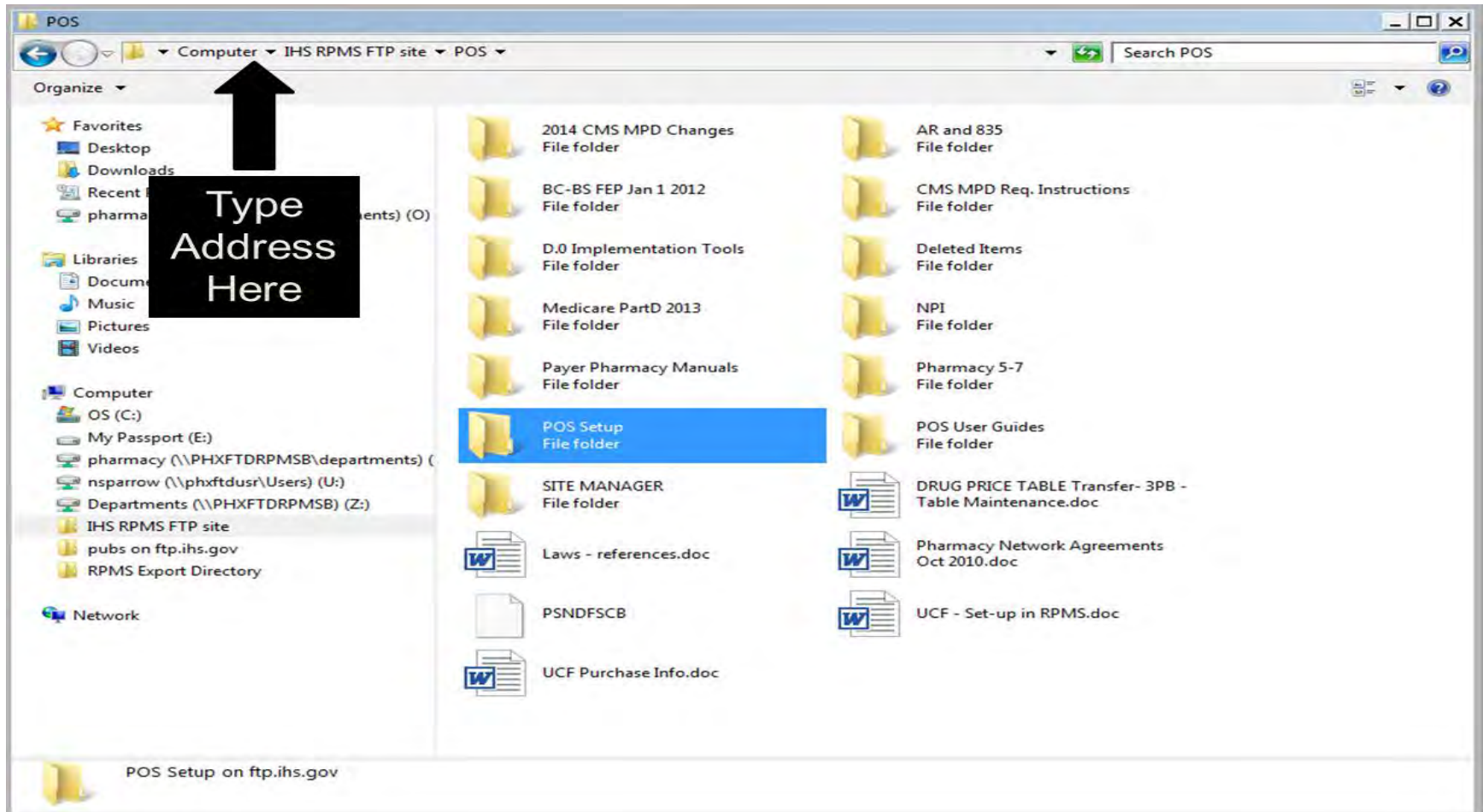
- All Point of Sale Users
 - ABSPZ Biller
 - ABSPZ Reports
 - ABSPZ User
 - ABSPZ Menu
- Restricted
 - ABSPZ Manager

POS Resources

- Resources:
 - www.ihs.gov
 1. Search for Resource and Patient Management Systems (RPMS)
 2. Click Applications Link
 3. Click Administrative Link
 4. Click Pharmacy Point of Sale (ABSP) Link
 - Has the manuals, technical, and installation information
 - <ftp://ftp.ihs.gov/rpms/POS/>
 - <https://secure.erxnetwork.com/logon.aspx?ReturnUrl=%2fDefault.aspx>
 - Create your own account by clicking on the link “Request a New Account”
 - POS Listserv
 - POS@listserv.ihs.gov

POS FTP Site

<ftp://ftp.ihs.gov/rpms/POS/>



Emdeon

<https://secure.erxnetwork.com/logon.aspx?ReturnUrl=%2fDefault.aspx>

The screenshot shows a web browser window titled "eRxSecure - Windows Internet Explorer". The address bar contains the URL "https://secure.erxnetwork.com/logon.aspx?ReturnUrl=%2fDefault.aspx". The browser's toolbar includes icons for back, forward, and refresh, along with a search bar and several bookmarked sites like "CoverMyMeds", "eRxSecure", "DailyMed", "License Lookup", "UFMS", "PAs", "CCMIS", "Medicaid Eligibility", "ITAS", "NIH Library", "DOPL", "UpToDate", "FILEMAN", "eRxSecure", and "Rx Intranet".

The main content area of the page features the Emdeon logo at the top left. Below the logo is a navigation bar with three tabs: "Emdeon User Home", "Voucher On Demand", and "EPCS Verify".

In the center of the page, there is a bolded note: ***PLEASE NOTE* There are two login options below. Please click on the Login button under the appropriate section, based on which services you wish to access.**

There are two login sections:

- Emdeon Services Login:** This section includes a link for "Request a new account", input fields for "Username:" and "Password:", a "Log In" button, and a link for "Forgot your password?".
- Emdeon DME Services Login:** This section contains a single "Login" button.

Below the login sections is a promotional banner with the text: "every prescription could be an invitation for **audit.** Lessen your audit risk with Emdeon Audit Advantage." The banner includes an image of a doctor and a patient.

At the bottom of the page, there is a footer with the following links: "Emdeon User Home", "Contact Support", "Contact Us", "Privacy Statement", and "Terms Of Use". Below the footer is the copyright notice: "© Copyright Emdeon Business Services LLC, 2005 - 2015 - All rights reserved".

Linking Insurer to POS format

- Reports *(Find Non-Linked Insurers)*
 - Paper Claims (POS/RPT/CLA/PAP)
 - Survey of Insurer (POS/RPT/SURV/INS)
- BIN/PCN numbers
 - Look at the Emdeon web site
 - Consider creating a master list for quick reference
- Three steps to Link POS format
 - POS/MGR/SET/INS
 - Step One: INS: Quick Setup of Insurer
 - Step Two: ADV: Advanced Setup of Insurer
 - Step Three: Enter/Edit RPMS Insurance file RX Settings

Priority Points: Definition

- Rx Priority – Assigning points or “***adding weight***” to insurer
- Rx Priority points are added to BASE POINTS
- Base Points
 - located in the POS Set-Up Menu
 - System wide set-up
- POS selects insurance to transmit electronically by determining which insurance has the most points assigned.

Calculate Points

	Base Points	Extra Points	Total
Ins Base Private	900	25	925 (2 nd)
INS Base Caid	600	None	600 (3 rd)
In Base Care	300	650	1250 (1 st)
In Base RR	300	None	300 (4 th)
In Base Self	100	None	100 (5 th)

Maintenance Reports

- List possibly stranded claims (Stranded Claims Report)
 - POS/RPT/MNT/STR
 - These just need to be resubmitted most times
- Find prescriptions missed by POS (Missed Claims Report)
 - POS/RPT/MNT/MISS
 - Many you won't worry about, but it will find a few on occasion that didn't go to POS for some reason
- Update Report Master File for a date range (Master File Update)
 - POS/RPT/MNT/URM
 - May want to have Taskman run this daily

Working Rejections

- Recommend to work rejections daily
- POS/RPT/MNT/URM
 - Run prior to working rejections and after working rejections
 - Report will clean-up any rejections that have been worked on by a different department (pharmacy, billing, etc.)
- Resubmissions
 - Most insurers accept up to 30 days
 - Try submitting a claim for each month
 - If payable: resubmit claims for the entire month
 - Stop submitting claims if the response is “claim to old”

Rejected Claims by Rejection Code Report

Single Site: POS/RPT/CLA/RCR

CHT #	NAME	RX #/FILL #	COBPayerINSURER	AMT BILLED
CARD HOLDER ID #	GROUP #	NDC #	DRUG NAME	

REJECTION CODE: 21:M/I Product/Service ID

Patient Name	951175/1P	D-ADVANCE-004336-MEDDA	\$ 15.03
G0158260701	RXCVSD	60429031810	LOSARTAN 100MG TABLET

Rejection Codes

- Rejection codes are NCPDP standard codes used by processors
 - See resource file NCPDP Pharmacy Denial Codes.xlsx
- M/I = Missing/Invalid

Working Rejections – Rejection/Claims Screen

- POS\U\U\

PHARMACY POINT OF SALE	Jun 23, 2015 13:58:52	Page:	0 of	0	
Transmitted by SPARROW,NICHOLAS with activity in the past 15 min					
#	PATIENT/PRESCRIPTION	COMMENTS			
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// █					

Working Rejections – Rejection/Claims Screen (cont.)

- POS\U\U\

PHARMACY POINT OF SALE		Jun 23, 2015 14:01:20		Page: 3 of 6	
All prescriptions with activity in the past 1 hr 30 min					
+#	PATIENT/PRESCRIPTION	COMMENTS			
31	METHOTREXATE 2.5MG TAB	Payable (953742.00001)			
32	MULTIVITAMINS WITH MIN	Unbillable to ins.; Native ben.; NDC 00904053980			
33	PREDNISONE 20MG TABLET	Payable (953744.00001)			
34	PROMETHAZINE 25MG TABL	Payable (953745.00001)			
35	SULFASALAZINE 500MG TA	Payable (953746.00001)			
36	done Patient Name	VA	** FINISHED **	1 rejected	*1 not electronic *3
37	LATANOPROST 0.005% OPT	Payable (949930.00021)			
38	CETIRIZINE 10MG TABLET	Rejected(70:Product/Service Not Covered) (950762)			
39	AMOXICILLIN 500MG CAPS	Payable (950764.00011)			
40	CYANOCOBALAMIN 1000MCG	Payable (951295.00011)			
41	CARBOXYMETHYLCELLULOSE	Unbillable to ins.; Native ben.; OTCs are unbill			
42	done Patient Name	** FINISHED ** BOTH not electronic **			
43	AMLODIPINE BESYLATE 5M	No insurance,Native ben. (952443.00001)			
+ 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:Next Screen//					

Working Rejections – New Screen

- POS\U\U\New

```
-----+-----+-----+
Ask Insurance? NO      +-----+ <PF1> E when done, to file claims
Ask Preauth #? NO     |   PHARMACY   | <PF1> Q to quit without filing claims
Ask Qty/Price? NO    | POINT OF    | <PF3> insert/overstrike modes
Ask Fill Date? NO   |   SALE     | <PF4> to go back one field
Ask Overrides? NO   | DATA ENTRY | Arrow keys may be used, too
-----+-----+-----+
Prescription NDC/CPT/HCPCS - Patient - - - - Drug - - - - - - - - - - Fill Date
1  ██████████
2
3
4
5
6
7
8
9
```

COMMAND:

Press <PF1>H for help

Insert

Working Rejections: Drug File Related

- Eliminate rejections by modifying insurer file:
 - 21: M/I Product Service ID
 - 54: Non-Matched Product Service ID
 - 70: Product/Service Not Covered
 - MR: Product Not on Formulary

Think about potential long-term ramifications before making changes

Working Rejections: Drug File Related

Eliminate rejections by modifying insurer file:

POS/MGR/SET/BILL

- OTC – Drugs marked as OTC in drug file
- NDC – Specific NDC's
- Name
 - Can be used to prevent billing of clinic meds, Omnicell, Pyxis, ER, etc. with an in-house naming convention (e.g. pyxisMeformin 500mg tab, ERMetfomrin 500mg)

Medicare Part D: Eligibility Check

POS/RPT/ELIG

Can also be checked using Emdeon CardFinder

CLA Claim results and status ...

SET Setup (Configuration) reports ...

SURV Surveys of RPMS database ...

ELIG Medicare Part D Eligibility Check

OTH Other reports ...

You can do a previous date, or a new date. It will give eligibility for the date entered.

Medicare Part D: Eligibility Check

On: FEB 15 2008@10:56:06

Patient Name: Patient, Demo

Medicare ID: 443226981D2

Status: A

Authorization #:

PATIENT INFORMATION

LAST NAME : Patient

FIRST NAME : Demo

DOB : NOV 06, 1936

MEDICARE D INFORMATION

Insurance Level : 0

BIN : 610649

PCN : 03200000

GROUP : P5448

CARDHOLDER ID : H58530359

PERSON CODE :

PHONE NUMBER : 8008658715

CONTRACT ID : S5884

RX BENEFIT PLAN : 081

EFFECTIVE DATE : APR 01, 2006

TERMINATION DATE:

LOW-INCOME COST: Y

FORMULARY ID:

TERMINATION DATE

Revenue Reports

- A/R Statistical Reports
 - POS/RPT/ADMN/STA
 - Must understand where numbers are coming from
 - A/R dependent
 - Dates: Approval, Visit, Export (not much difference for most pharmacy claims)
 - Numbers will change on you if you run it for a recent period of time
 - Useful when compared to DAY report when looking back a year or so

Revenue Reports (cont.)

- DAY – totals by release date
 - Single Site: POS/RPT/ADMN/DAY
 - Multiple Site: POS/RPT/SITE/DAY
 - DAY report includes Medicare Part D totals
 - Will not contain Medicaid payable totals if not billed Point of Sale
 - It will list paper claims, but it is the billed amount, not the paid amount
- PSR – Period Summary Report – A/R dependent
 - POS/RPT/ADMN/PSR
 - Shows revenue that has been or is about to be received
 - Good for reporting purposes (if A/R does a good job)
 - Good report to showing actual revenue coming in
 - Can be broken up by Medicare, Medicaid, and Private Insurance
 - Will include Medicaid revenue even if billed on paper
 - Will be delayed from the actual processing of the medications
 - 2 to 6 months
 - Can filter by clinic or visit type

PSR Report

Select Visit LOCATION: FT.DUCH. HC FT.DUCH. HC

Select one of the following:

- 1 A/R ACCOUNT
- 2 CLINIC TYPE
- 3 VISIT TYPE
- 4 DISCHARGE SERVICE
- 5 ALLOWANCE CATEGORY
- 6 BILLING ENTITY
- 7 INSURER TYPE

Select criteria for sorting: 2 CLINIC TYPE

Select Clinic: ALL// 39 PHARMACY 39

Select Another Clinic: D1 ANTICOAGULATION THERAPY D1

Select Another Clinic: D5 PHARMACY PRIMARY CARE CLINIC D5

Select Another Clinic:

===== Entry of TRANSACTION DATE Range =====

Select Beginning Date: -30 (JUN 08, 2015)

Select Ending Date: T (JUL 08, 2015)

PSR Report (cont.)

- The different columns are independent numbers
 - Payment is what you interested in
- Summary of what happened during the given period
- Payment + Adjustment + Refund will not add up, but may be close

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Period Summary Report by CLINIC TYPE          JUL 8,2015@16:54  Page 1
with TRANSACTION DATES from 06/08/2015 to 07/08/2015
at FT.DUCH. HC Visit location(s) regardless of Billing Location
=====
CLINIC TYPE          Billed Amt    Payment    Adjustment    Refund
=====
PHARMACY              240,059.96    100,553.49    123,458.25     0.00
-----
*** VISIT Loc Total    240,059.96    100,553.49    123,458.25     0.00
=====
***** REPORT TOTAL    240,059.96    100,553.49    123,458.25     0.00
=====

```

Drug File

ORDER UNIT: BX//

DISPENSE UNIT: TAB//

DISPENSE UNITS PER ORDER UNIT: 140//

NDC: 51285-0080-70//

PRICE PER ORDER UNIT: 80.89//

LAST PRICE UPDATE: APR 28,2006@16:26:17//

BENCHMARK PRICE PER ORDER UNIT: 8.17995

BENCHMARK PRICE PER DISP UNIT: 000000.54533//

********BENCHMARK PRICE PER DISP UNIT: must be populated to work properly through POS********

AAC and Benchmark Price Updates

- Update regularly
- See cheat sheet in the files for this class
- Benchmark and AAC price updates
RPMS.doc

Contact Information

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