INSIGHT

THE QS/1 MAGAZINE

January 2003

QS/1's Approach to Home Medical Equipment...

QS/1.

www.qs1.com

Bill Cobb
President, QS/1

Twenty years ago, in December 1982, QS/1 introduced its first system or service outside of pharmacy software: a product for the home medical equipment market. After those first tentative steps, our HME product, now known as SystemOne, has become an integral part of QS/1's product line.

During the last two decades we've expanded and improved our service to the HME industry. With a new look for the SystemOne product and a new entry-level version of the system (p. 8), this product continues to grow to fit the needs of customers like Dick Wilcox, whose spotlight article (p. 5) illustrates one face of HME today.

And QS/1's recent acquisition of the TeleScript and TeleCare products from OmniSYS, Inc. (p. 15) adds yet another option for customers in the HME market. We plan to continue supporting and enhancing the TeleCare system, an easy-to-use basic HME product, for both current and prospective customers. To those former OmniSYS customers who recently joined the QS/1 family, let me say welcome. We're always glad to have new faces join us, and I look forward to the new perspectives you bring.

The pharmacy and the HME industries have become more complex and more specialized, and QS/1 is continuing the process we began 20 years ago: looking for new products and new ways of giving customers what they need. Thanks for traveling down this path with us.

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HIPAA

Are You Ready? It's Time To Take HIPAA Seriously!

HIPAA privacy regulations go into effect in less than three months. On April 14 the practice of maintaining patient privacy, which many consider to be common sense, will be subject to regulations and substantial fines. Unfortunately, many independent pharmacies and home medical providers still have not even begun to prepare themselves for these changes. Many people mistakenly believe that a software company, such as QS/1, can make you HIPAA compliant. If you're one of those people, the time to start preparing is now.

The first step in getting ready for HIPAA is appointing a privacy officer. In most small pharmacies and home medical providers, the owner ends up being this person. The privacy officer oversees the implementation of the regulations within the company. If your company is starting to prepare now for HIPAA, this may consume a significant amount of time; therefore make sure the person appointed has the time to do the job.

The hottest new technology to hit the marketplace is electronic signature capture. These devices, similar to the ones you see in electronics stores and home improvement stores, can process credit and debit cards, record signatures, and even prompt you to answer questions. Many pharmacies think that the electronic signature log is needed for HIPAA compliance. That is simply not true. HIPAA compliance has to do with the patient's right to privacy, and there are many ways to do that. What electronic signature devices do is provide a very simple way to store and track signatures and provide a level of confidentiality by eliminating the signature log book.

A good application for these electronic signature capture devices will be the Notice of Privacy Practices. This notice needs to be made readily available to all customers. Posting the notice in your store and on your web site, as well as having a tray of paper copies on the counter, will all be necessary. It is not required that the customer read the notice, but it is required that you attempt to obtain an acknowledgment that the customer has received the notice. The notice must be signed by the person for whom the prescription or physician's order was written, or that person's legal guardian, or a power of attorney.

The regulations state than an acknowledgment should be obtained before the first service is rendered (on or after April 14). If that acknowledgment cannot be obtained, then the reason why must be documented--for example, if a different person (such as a spouse or friend) picks up the prescription or if the person refuses to sign an acknowledgment. These acknowledgments must be retained for at least six years from the last date of service. Electronically storing these signatures is a good way to prevent another file cabinet full of paperwork. Naturally, if you invest in an electronic signature device you'll want the device to help you keep your third party signature log and counseling log as well.

Documenting procedures to safeguard patient confidentiality is part of the regulations. Focus on the confidential data that comes in and out of your company. Where does it come from? Who takes it? Who does that person pass the information to? How does information leave your company? How can it be disclosed to the wrong person? You should build a list, looking at all aspects of your company, from those that should have access to that information to those that shouldn't.

From the list you compile, you can document your procedures for protecting patient privacy. Remember that confidential data that is disclosed without permission needs to be documented. Any customer is allowed to ask for a full listing of all disclosures, and a covered entity has up to 60 days to comply. These procedures need to be formally documented and made available to the federal government if necessary. This part of the regulations is not always fully understood and obviously cannot be solved by the software you use.

A business associate agreement is required for every company that you do business with that is not a covered entity (healthcare provider, healthcare clearinghouse, or health plan). An example of a business associate is QS/1, because trainers, installers, and support technicians may see confidential data stored on your computer. A business associate agreement is separate from any other contracts because it is specific to how the associate keeps the data confidential. Sample business associate agreements can be found in various places on the web.

Training is often overlooked in the privacy regulations. The regulations themselves are very vague about training, as they do not give specific information on how much training an employee must have or specifically what it should cover. The regulations simply say that the training program must be documented, that all employees of the covered entity must be trained, and that additional training is necessary as procedures and rules change. Keep in mind that non-paid personnel, such as interns and volunteers, also need to be trained if they are considered part of the covered entity. Remember, HIPAA privacy training should be a part of any new employee orientation.

HIPAA is much more than transaction sets and software updates. The privacy rules that are a part of HIPAA are about the way business is done. If your company hasn't taken a serious look at the privacy rules, time is running out. The steps taken now to prepare for these regulations will save time and money in the future.

By: Rich Muller
Industry Analyst Manager, QS/1

Customer Spotlight

Wilcox Pharmacy
Rutland, VT

Dick Wilcox, RPh, runs Wilcox Pharmacy with an eye to serving the unique needs of his population. Noting that the population of the state of Vermont is only 600,000, Wilcox said, "We're in a very rural area, so it's hard to be too specialized. We're a jack of all trades."

Wilcox Pharmacy offers a range of services including retail pharmacy, home medical equipment, long-term care, respiratory, home IV infusion, orthopedics, and rehabilitation.

As his business became more complex, Wilcox chose QS/1 software for his pharmacy four years ago, then added SystemOne for HME the next year. His primary need? Reliable support. "Software is software," Wilcox said. "Most programs work in similar ways. It boils down to vendor support, and QS/1 has been great at that. It's usually a crisis when we need help, and it's always good to know that we can get someone on the phone."

While Dick Wilcox has been in the HME business for 15 years, his involvement recently took on a wider scope. In his second year as president of the six-state New England Medical Equipment Dealers, Wilcox says that participation in NEMED has been good for the Vermont HME providers who previously had a smaller, informal organization.

"We were missing the educational piece that a larger group can provide," he said. The merger into NEMED gave Wilcox and other HME providers access to educational programs on reimbursement, Medicaid, and other issues facing the HME industry.

The organization has recently become more involved on the national front. "We've made two trips to Washington to lobby against competitive bidding," he said. "Being politically active and letting people in our association know about the issues facing them is relatively new for us."

And in the midst of his busy leadership of NEMED, Dick Wilcox regularly sees a familiar QS/1 face: marketing representative R.J. Buckingham, who did the initial training for Wilcox Pharmacy. "R.J. attends NEMED meetings, and QS/1 is an associate member," Wilcox said. "I appreciate that support, and I enjoy the relationship we've built with R.J."

By: Jennifer Langham
Communications Specialist, QS/1

Owner of Wilcox Pharmacy since: 1988

QS/1 systems: RxCare Plus, SystemOne, PrimeCare

How QS/1 helps Wilcox Pharmacy's business: QS/1's reporting capability is one example, Wilcox says. "We worked with QS/1 to reconfigure our pharmacy system and isolate the compounding prescriptions for reporting. Compounding is relatively new for us, and the system helps with tracking, reporting, and planning for this part of our business."

Why Wilcox recommends involvement in industry associations: "You learn a lot. You get exposure to national issues, and to issues facing other states. Yes, we're competitors, but we're all in the same boat with the issues we face."

The future for Wilcox Pharmacy: "We're always looking for new services to offer, and I think this gives us a degree of protection," said Wilcox. "If any one area of our business took a hit, we're multifaceted."

For more information on the New England Medical Equipment Dealers association, see the web site at www.nemed.org.

•Dick Wilcox, RPh

Proper Credit Card Acceptance & Fraud Prevention

By: Don E. Lassiter, Senior V.P., Heartland Payment Systems

For those of you who attended the QS/1 customer conference in August, this article will be very familiar; for those of you who did not, I hope it will provide some valuable information to help you prevent future losses involving credit card acceptance.

Credit card payments have increased over the last several years, and, unfortunately, fraud in one form or another has also increased. There are several steps you can take as merchants to minimize those losses to your business. The first step is recognizing that fraud can occur in many different ways. You as a merchant have exposure from dishonest customers, dishonest employees, and fraudulent cards.

All credit cards have security features to aid you or employees in identifying valid or invalid cards. On the front of each MasterCard and Visa card, the first four digits of the card number should be written to the left and below the embossed card number. On a Visa card there should be a hologram of a flying dove on the right side of the card. On a MasterCard the hologram is of a globe. These holograms are not easily reproduced and should always appear clear and crisp. Also a flying "V", will appear on the lower right side of a Visa card and flying "MC" in the same location on a MasterCard. The expiration date should always be present and current.

Security features are also found on the back of both card types. On MasterCard and Visa their names, respectively, will be printed diagonally across the signature panel. If the signature is erased, the word "void" will also appear on this panel. The signature panel is also the location for the card number and a "CVV2" security code to appear. The signature must be present on the panel, and, if not, another form of identification should be requested and the customer asked to sign the card. A quick visual scan of both the front and back of the card will help in identifying most fraudulent cards presented for payment.

Another area of fraud, and the most surprising, is from employees. In most cases, this occurs when a trusted employee performs a manual sale using a customer card and then does a credit for a cash sale and puts the money in their pocket. Your books are balanced for the day, and you will not be aware of fraud until the cardholder customer complains of an additional sale that results in a chargeback to you.

One of the fastest growing areas of fraud is known as "skimming." This occurs when a dishonest employee uses a handheld skimming device capable of reading a card number and other information when the card is swiped through the device. The device stores this information, which can be downloaded onto a laptop and then used for magnetically encoding other cards. Your customer is unaware that their card number will eventually end up on the back of another card, and this card will be used to make purchases.

Credit card fraud is a serious issue for any merchant. I hope this information will be beneficial to you; other information about card acceptance may appear in future articles.

I may be reached for questions or assistance at (888) 798-1717.

Changes Ahead for Electronic Claim Submission in the HME Industry

By: Duane Ridenour, SystemOne Industry Analyst, QS/1

The process of Electronic Claim Submission (ECS) has seen few changes over the last two to three years. But thanks to CMS and HIPAA, a giant change in ECS is underway. The biggest change is in the format for these claims, which QS/1 has already passed.

The second most significant change is the push for the end of paper claims. CMS, formerly known as HCFA, has provided little information on this change, but their goal remains unchanged. In addition, CMS requires the "elimination of the free billing software effective October 2003" per the Region D DMERC Dialogue April 2002.

Changes such as these create burdens on suppliers who have not prepared for them. The time to plan your response to these changes is now, and some important items to consider during your planning process are:

- How important is software compatibility between your existing systems?

- Are you going to use a different vendor and struggle with data integration or duplicate data entry?

- Do you want to develop a relationship with another software vendor or maximize your existing relationships? This is critical with the many newcomers to the software industry.

- What resources are available to you?

- Is there someone available during *your* business hours? If you are located in the Eastern time zone and your vendor is in the Pacific time zone, will you be able to obtain the answers to your questions when you need them?

It is important to remember that you are partnering with your vendors to improve your customer service, increase productivity and efficiency, reduce payment delays, and manage your inventory.

The changes associated with ECS aren't all bad news. Electronic Claim Submission addresses some of the crucial components of success by shortening the reimbursement delay through timely error reports, ERNs and EFT (Electronic Funds Transfer). For those providers who are prompted by these changes to move to a new HME management system, some of the benefits of using software are order and documentation tracking, the reduction of keystrokes to produce a recurring order, and improved inventory management, including the minimizing of emergency calls.

The constant changes that occur in our industry require us to respond quickly to these changes. If the formula Time = Money is remotely true, then we must be vigilant in searching for areas where we can save time. Harnessing the strengths of the computer can help us to reduce time consuming tasks. For example, the ERN payment posting feature eliminates the need for manually posting a multi-page Medicare remittance advice.

ECS will become the standard for the HME industry, but consider this, computers have made our lives easier and more comfortable. Preprogramming the coffee pot the night before allows us to wake up to the smell of freshly brewed coffee. In the same way, we can use the computer to plan ahead, ease our work, and better manage our business.

New Look, Options
& Products ...

The HME market for QS/1 has changed a lot over the last 20 years, with three big changes occurring recently. These changes include the introduction of a new graphical user interface for SystemOne, the purchase of the OmniSYS TeleCARE product, and the introduction of a new entry-level version of SystemOne to replace the DMERC free software that will no longer be available after October.

QS/1's Approach to Home Medical Equipment

By: Jay Williams, SystemOne National Sales Manager, QS/1

New Graphical User Interface

In December 1982, QS/1 introduced a new product for the HME market, SystemOne. Since that time, SystemOne has seen many changes, including its move to a 32-bit Windows application in 1998. But one of the most significant changes QS/1 has made to this product was introduced at Medtrade in October 2002. SystemOne moved from a character-based interface to a graphic user interface (GUI). HME providers who viewed the product at Medtrade loved it and said that it appeared much easier to learn and use.

The new feel to the program includes:

Familiar Arrangement: Most items are where they were in the older version of SystemOne, significantly reducing the learning curve on the new version.

Logical Rearrangement: Some fields on the patient, item, and transaction screens have been rearranged for more logical use. See the example of a patient screen below.

Full Descriptions: The screens in the older version of SystemOne used many abbreviations, while almost all screens in the new version use complete descriptions.

Context Sensitive Help: The new version of SystemOne has context-sensitive Help that can be accessed by placing the cursor in the field for which you need help and pressing the F1-Help key. A small Help box pops up right next to the field with an abbreviated version of the full Windows Help manual.

No Hidden Options: The older version of SystemOne had many hidden function keys or ALT + key functions that had to be memorized or accessed through F12. In the new version of SystemOne, all functions are displayed on each screen as either tabs for additional data or as buttons for functions across the top of the screen.

Drop-Down Lists: In the new version, drop-down lists automatically display multiple predefined choices such as sex, state, and price codes in the patient file.

Additional Active Functions: In the new version of SystemOne, users can have up to four different windows or functions open at the same time with just one client.

New features include:

Password Operation: In the new version of SystemOne a password has to be entered only once when you start the program, and SystemOne remembers the correct security.

Transaction Entry: The new version of SystemOne includes a more convenient method for transaction entry: entering the type of transaction first (patient, item, transaction, doctor, carrier, etc.) and when the screen for that choice displays, the system user enters the appropriate code. The user may then press ENTER to go directly to that entry or select the FIND button and access a scan.

Revised Scan: The new version of SystemOne allows backward as well as forward scanning.

Daily Operations: A new module called "Daily Operations" has been added. This menu choice allows moving directly to the Single Transaction Entry, Multi-Item Transaction Entry, or Purchase Orders/Inventory Control.

Saving Entries: In the old version of SystemOne users had to remember to press F1 to save work. The new version of

SystemOne makes saving information easier with the following options: 1) Autosave, which automatically saves new entries or changes even if you press the ESC key; 2) Prompt Before Saving, which automatically prompts you that changes have been made and asks, "Do you wish to save your changes?"; and 3) Discard Changes, which does not automatically save changes or prompt the user before exiting.

Report Select Options: Three new features have been added in this area. First, the number of select options for each report has been expanded from six to 12. Second, the change feature of Select has been completely rewritten to include three easy-to-use columns: Files, Fields, and Selections (see the sample screen). Third, up to 100 different versions of each report can be saved permanently.

Set Lock Time: To comply with the privacy and security portions of HIPAA, each computer/user combination can set a time to automatically blank the screen and ask for a password to return to the program. Only the person who started SystemOne on the workstation can unlock the screen saver.
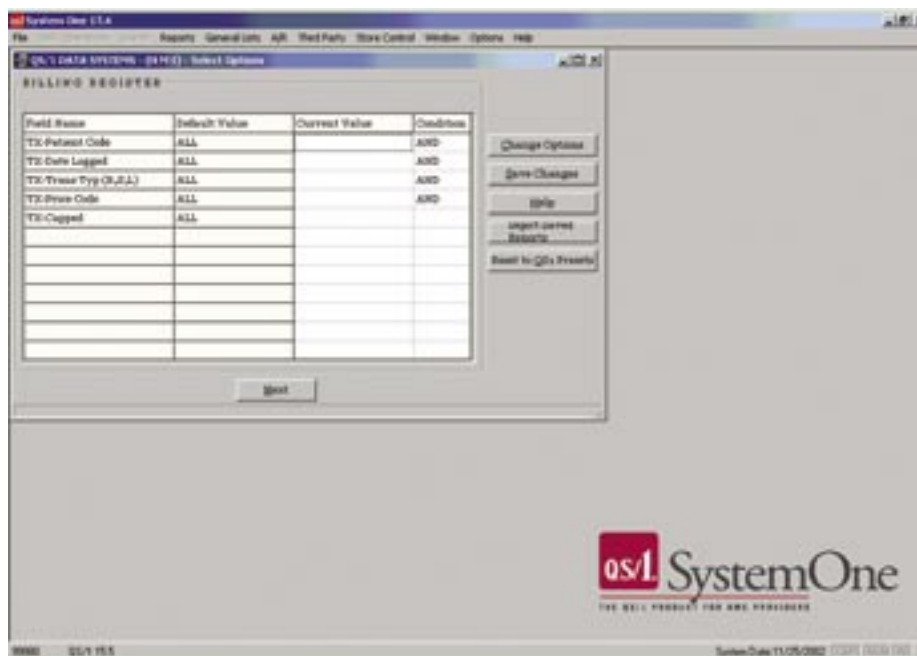
Each of the QS/1 regional offices has training classes on the new features of SystemOne scheduled for the first quarter of 2003. Make sure to check the training schedule in the back of this issue for a class close to you. There will be an in-depth look at this new version at our HME Conference in February.

Purchase Of TeleCARE

QS/1 purchased the TeleCARE (HME) and TeleSCRIPT (pharmacy) programs from OmniSYS, Inc. in September 2002. While the TeleSCRIPT users are given the option of upgrading to either CRx or RxCare Plus, it is QS/1's intention to continue to support, enhance, and market the TeleCARE product. Some of the key features of TeleCARE include:

- TeleCARE is known for its ease of use.
- TeleCARE has the ability to support an unlimited number of additional stores, which makes TeleCARE a great choice for billing services.
- TeleCARE has an indexed DMERC manual to look up CMS and DMERC billing policies and procedures.

TeleCARE was the first true 32 windows based HME program on the market.

Introduction of SystemOne Entry Level

With the discontinuance of the DMERC free software coming in October 2003, QS/1 offers something to help the many pharmacies who choose to bill the DMERCs with this product. At the same time, QS/1 also offers some solutions to the limitations in the DMERC free software, including the ability to print delivery tickets and physicians orders that meet Medicare requirements plus the ability to easily handle recurring sales and rentals. The solution was SystemOne Entry Level. This new version of SystemOne is designed with prices for both software purchase and monthly support that are affordable by all pharmacies using the DMERC free software.

These new changes to QS/1's HME product options reflect a commitment to growing along with the industry. For more information on how one of these options can enhance your business, contact QS/1 Marketing Support at (800) 231-7776.

*P*roduct *U*pdates

IVR Update

You may have read in the previous Insight magazine that QS/1 has developed an Interactive Voice Response system of its own, which will seamlessly integrate with the QS/1 pharmacy systems RxCare Plus, PrimeCare, and CRx. To update the status of this project, the QS/1 IVR was installed and tested at QS/1 customer test sites in December 2002, and QS/1 has now completed the second phase of the QS/1 IVR project. This phase consisted of adding additional features, including the security validation method, to the IVR.

Security validation is an exciting feature that enables the pharmacy to set security parameters based on phone number, last name, or date of birth. When the patient requests a refill over the IVR, he or she will be asked to enter one of these identifying numbers, which will be validated along with the prescription number. This feature makes the pharmacy refill queue secure, and in phase three of the IVR project, the medical record number will become another identifying option.

Another feature added to the QS/1 IVR is the capability of allowing doctor messages to flow into the RxCare Plus, PrimeCare, and CRx systems. These doctor messages can be selected and sorted from the tickler file along with the regular IVR prescriptions. This functionality is another great feature that enhances QS/1's workflow tools.

The IVR will be ready for general release in RxCare Plus and PrimeCare releases 17.5 and CRx release 6.3 and ready to market in the first quarter of 2003.

Winfax Replacement on the Horizon

Winfax, the Symantec faxing product that QS/1 has offered with its systems for several years, will be replaced with a QS/1-developed faxing mechanism in Windows XP systems.

Symantec is not providing a Winfax programming interface to other products under the Windows XP platform, explained QS/1's Sonny Anderson. The lack of an interface from Winfax to QS/1's systems will make the Winfax product much less useful for pharmacies.

"QS/1 customers who have Winfax can continue using it until they upgrade to a server or workstation with Windows XP," said Anderson. "We do expect that QS/1's faxing mechanism will address some of the reliability issues that many customers have had with Winfax."

The QS/1 faxing mechanism, which will initially have only outbound faxing capability, will be ready for shipment in first quarter 2003.

New Version of QBACK

QS/1's backup program, QBACK, has been updated to enable backups of the entire QS/1 folder. The new QBACK, rewritten as a Windows Application rather than a QS/1 application, duplicates the server's program library as well as the data files.

Using the QBACK software requires stores to have two QS/1 servers. With the new version of QBACK, stores can maintain a backup server which stays current with both data and programs, meaning less downtime in case of a major problem with the main server.

"We've had customers in the past who have used their backup server and been disappointed when the machine needed library backups," said Sonny Anderson, director of product development. "The new QBACK makes keeping that backup server up-to-date much more convenient. This makes it easier for customers to recover from a catastrophic problem with the server."

QS/1's upgrades department has information on pricing for the new QBACK program.

WebConnect

Recently, at the ASCP Annual Convention in Anaheim, CA, QS/1 unveiled a new communication product: WebConnect. For years, PrimeCare customers have wanted a way to communicate between their pharmacies and the nursing facilities they serve. Previously existing technology made this link expensive or unreliable. Using the Internet, WebConnect is the link between the facility and the pharmacy's data. Since many people are familiar with using a browser on the Internet, it makes sense to use Microsoft's Internet Explorer as the starting point for WebConnect.

WebConnect basic features allow the pharmacy to set up and control facility-level security so that a person from one facility can see only the patients from that facility. Staff at the nursing facilities are able to:

1. Look up patients and add patients.

2. View the patient medication profile and view the patient ancillary profile.

3. Process refill orders from the facility directly into the pharmacy filling queue.

4. Process new orders from the facility directly into the pharmacy electronic prescription queue.

5. Access drug information including interaction checking and patient education monographs.

WebConnect is installed as a web site in the pharmacy or can be hosted by QS/1. The WebConnect web site communicates with the PrimeCare server using TCP/IP; software requirements include Windows 2000 or Windows XP, Internet Explorer 5.5 or 6.0, and PrimeCare 17.6.

We expect to install WebConnect in our alpha test site in early 2003 and expect to start general distribution by the second quarter of 2003.

Electronic Signature Capture in Development

Electronic signature capture is becoming the industry answer to meeting HIPAA requirements and reducing paperwork. QS/1's electronic signature capture is in development and will be ready for release in first quarter 2003.

Unlike some of the electronic signature capture programs offered by outside vendors, QS/1's new capability is being provided for no additional charge under the QS/1 software maintenance agreement. Information on the hardware needed for electronic signature capture is available from QS/1's upgrades department.

QS/1's electronic signature capture solution will be available with RxCare Plus version 17.6 or CRx version 8.0. [Keep in mind that the signature capture device attaches to a QS/1 workstation.]

QS/1's electronic signature capture system will help pharmacies capture HIPAA privacy acknowledgments and patient decisions about counseling. It will also maintain third party logs required by insurance companies for proof of service. Other uses for the electronic signature capture are in development and will be implemented in the future.

Electronic signature capture alone will not make a pharmacy HIPAA compliant, nor is it absolutely necessary to have electronic signature to be HIPAA compliant. Refer to the article on page 4 to make sure you have properly prepared for HIPAA.

*P*roduct *U*pdates

New Hardware Offers...
New Options

While QS/1's software gives pharmacy, HME, and POS systems their functionality, hardware is an equally important component to store operations. QS/1 is always looking for new hardware that will keep customer operations running smoothly and efficiently, and the new laser printer, new scanner, and DVD ROM upgrade offer options that many customers will find exciting.

New laser printers available
For years QS/1, along with most pharmacy system vendors, has worked almost exclusively with Lexmark for our printer needs. Few other printer manufacturers had the special paper-handling capabilities that pharmacies require.

Now, however, there's a new high-quality printer for pharmacies, and QS/1 is proud to offer Kyocera Mita laser printers as a customer hardware option. Kyocera's experience in ceramics, electronics, and telecommunications made it an excellent partner with the Mita Corporation in producing a printer that meets the needs of pharmacies.

Kyocera Mita's niche in the printer market is what they call ECOSYS technology. With ECOSYS, there is no toner cartridge to replace. Toner refills, which cost about a third of the cartridges, are biodegradable and can simply be thrown away after use. The bottom line is that these printers have a lower cost-per-page for high-quality printing and make a great printer upgrade for many pharmacies.

Scanner adds new dimension to prescription scanning
The paper prescription-scanning feature in release 17.1 was met with excitement from many of our pharmacists. However, one complaint from some pharmacies was that the Epson scanner we were using had a larger footprint than they wanted on their crowded counter spaces. QS/1 is still selling the Epson scanner for those who would like a flatbed scanner for other uses, but for those who want a scanner specifically for prescriptions, we now offer the Cannon DR-2080C. This scanner is less than one foot wide, less than 8.5" high, and just 3.5" deep, so for who have limited space but want to scan prescriptions, this scanner is a good option.

DVD ROM
The increasing complexity of QS/1 programs, along with an increase in the quantity of clinical and POS data being distributed, has led QS/1 to start planning for a move to DVD media for software distribution. The 650 MB offered by CD will soon be insufficient to meet the needs of our customers. In the future, when software and clinical information is distributed on DVD, all systems will need a DVD ROM drive for reading the new media.

If you have purchased a new server in the past year, chances are very good that you already have a DVD unit. We will continue selling servers with internal DVD drives, and we will offer DVD upgrades to customers who have other hardware maintenance work done.

DVD units used for backup devices cannot be used for loading programs since the program disk must remain in the drive. The good news is that the internal drives are inexpensive, and QS/1 will work with customers to make the upgrade process as smooth as possible.

NEWS *F*rom the IN**S**IDE

Second PowerLine Now Operational

QS/1's second PowerLine site at the Richmond Development Center has been operational for a year now, and it is carrying a significant portion of pharmacy claims. With lines supplied by major carriers AT&T, WorldCom, Sprint, and Verizon, the RDC PowerLine facility is fully equipped to handle all of QS/1's PowerLine traffic in the event of a failure at the Spartanburg location.

QS/1's Sonny Anderson explained that the RDC PowerLine added an extra measure of security to the features already in place on the Spartanburg PowerLine. "Of course we have generators, fire and lightning protection in place to keep the Spartanburg PowerLine running for our customers," he said, "but the additional physical location adds a safety feature that makes PowerLine as reliable as possible for the customers who depend on it."

QS/1 Purchases OmniSYS Pharmacy, HME Products

QS/1 recently purchased the TeleScript and TeleCare products from OmniSYS, Inc. These pharmacy and HME products are used by approximately 300 customers in the West and Midwest regions of the country. QS/1 is offering RxCare Plus upgrades to the TeleScript customers; the TeleCare product is being maintained as an additional product option for customers who want an HME management system that primarily handles billing.

"OmniSYS wanted to focus on their HME claims service, so this acquisition is good for them and for QS/1," said QS/1 President Bill Cobb. "We're committed to continue providing software solutions for pharmacy and HME customers."

The former OmniSYS customers will now have access to services and products such as integrated Point-of-Sale and IVR tools, prescription scanning, faxing of electronic refill requests, workflow and disease management tools.

Pharmacy First Reimbursement Rates Climb in 2002

QS/1 gives pharmacies the option of participating in several data collection programs, and one of the biggest of these

is the Pharmacy First program. Pharmacy First, a rebate program for independent and small chain pharmacies, recently changed its enrollment procedures, and there are now no upfront costs for participating pharmacies to have their data collected.

This reduction in costs was one reason that member pharmacies actively transmitting prescription data through the network saw a sharp rise in dollar earnings in 2002. Better programs, top products, and improved performance were also contributors to pharmacies' improved rebate earnings, says Pharmacy First. Based on an average 150 prescription transactions per day, member pharmacies are now earning program rebates totaling approximately $6700 annually, which breaks down to an average product rebate of $0.12 per prescription.

For additional information about Pharmacy First and how your pharmacy can enroll, call QS/1 at (800) 231-7776.

New Health Information Improves Web Products

Contracts were completed in October to bring the award-winning health content of Drug Facts and the Adam Medicine Group to the health center pages of CornerDrugstore and ChainRx.com. "Our goal of bringing the industry's best health content to CornerDrugstore and ChainRx has been realized with the signing of agreements with companies of this caliber," says R. Chris Sigmon, Manager of Web Products for the J M Smith Corporation. "We will begin to incorporate this material into CornerDrugstore and ChainRx immediately," Sigmon emphasized.

The new health data includes the Illustrated Health Encyclopedia, Health and Wellness tools, Alternative and Complementary Medicine, and The Body Guide from Adam's award-winning illustrated library of health information. Drug Facts will supply A to Z Med facts, pill images and identification tools, and a drug interaction tool, all suitable for use by consumers. In addition, J M Smith Corporation and Drug Facts have entered into a reseller agreement which will allow efacts™, the electronic version of Facts and Comparisons, to be offered on the web site.

"Our goal is to continue adding to the effectiveness of these tools for the pharmacist," said J M Smith's Chris Sigmon.

NCPDP 5.1

What's the latest with NCPDP 5.1 and your QS/1 software?

John Frady

NCPDP 5.1 and QS/1

By: John Frady, Pharmacy Industry Analyst, QS/1

To meet the standards for the NCPDP 5.1 communication format required for pharmacy claims, the following enhancements have been added to the QS/1 RxCare Plus, RxCare Plus Basic Mode, and PrimeCare systems. Third parties will indicate to pharmacies which fields are required for successful claims submission. The release availability of each enhancement, the fields added, and access in the system are indicated below:

Release 16.4 and higher:

1. Added the Provider Number Qualifier (refers to the provider Number on the Price Code). Access Third Party options. The field Prov<Qual> added next to Provider Number field. Position cursor in field and press ENTER to display window with valid list of qualifiers. Qualifiers are:

   01 - National Provider ID (NPI)
   02 - Blue Cross
   03 - Blue Shield
   04 - Medicare
   05 - Medicaid
   06 - UPIN
   07 - NCPDP Provider ID
   08 - State License
   09 - Champus
   10 - Health Industry Number (HIN)
   11 - Federal Tax ID
   12 - Drug Enforcement Admin (DEA)
   13 - State Issued
   14 - Plan Specific
   99 - Other

2. Added the Patient ID Qualifier. Access Plan parameters screen. The field Pat ID Qualifr> added in the Transmission Information list. Position cursor in the field and press ENTER to display window with valid list of qualifiers. Qualifiers are:

   01- Social Security Number
   02 - Drivers License Number
   3 - Military ID
   99 - Other

3. Added Insurance Policy # Qualifier. Access Patient record, patient Insurance Record, Patient Insurance Additional Information (Patient Insurance screen in Basic Mode Rx Processing). The Qual field added. Position cursor in field and press ENTER to display list of valid qualifiers. Qualifiers are:

   01 - National Payor ID
   02 - Health Industry Number (HIN)
   03 - Bank Information Number (BIN)
   04 - NAIC
   09 - Coupon
   99 - Other

4. Added Doctor Location Code. Access the Prescriber Record. The user defined three character field Location added.

5. Added the Coagent and Coagent Qualifier. Access Patient Outcomes screen. The 19 character Coagent field and two character Qual field added. Position cursor in the Qual field and press ENTER to display a list of valid qualifiers. Qualifiers are:

   00 - Not specified
   01 - Universal Product Code (UPC)
   02 - Health Related Item (HRI)
   03 - National Drug Code (NDC)
   04 - Universal Product Number (UPC)
   05 - Department of Defense (DOD)
   07 - CPT 4
   08 - CPT 5
   09 - HCPCS
   11 - NAPPI
   12 - EAN
   13 - DIN
   14 - Medi-Span GPI
   15 - First DataBank GCN
   16 - Medical Economics GPO
   17 - Medi-Span DDID
   18 - First DataBank SmartKey
   19 - Medical Economics GM
   20 - ICD-9
   21 - ICD-10
   22 - Medi-Span Diagnosis Code
   23 - NCCI
   24 - SNOMED
   25 - CDT
   26 - DSM IV
   99 - Other Key
   Press ENTER to display additional codes.

6. Added ability to respond to up to 2 DUR messages at the DUR window or at the Patient Outcomes window. A window displays with the question "Do you want to respond to another DUR?". Type YES to respond to the second DUR.

7. Added additional tax formation. Access Transaction Update screen. Position cursor in Tax field and press ENTER to display tax information. Tax fields are:

Tax amount	xxx.xx-
Tax Percentage	xx.xxxx
Tax Percent Amt	xxx.xx-
Percent Basis	
Flat Tax Amount	xxx.xx-

Release 17.1 and higher:

8. Added ability to respond to up to 9 DUR messages at the DUR window or at the Patient Outcomes window. A window displays with the question "Do you want to respond to another DUR?". Type YES to respond to another DUR.

9. Added partial refill option. This option adds three new fields to the Additional Prescription Information window. Option B from the prescription. The new fields are <Status>, Intended Quantity, and Intended Day's Supply. Position cursor in the <Status> field and press ENTER to display valid status options: Options are:

   P - Partial Fill
   C - Completion of Partial

   Message displays during prescription processing informing pharmacist/technician if previous fill was partial fill.

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For more information,
call Susan Mintz, QS/1 Marketing
1.800.845.7558 ext. 7253

Customer Conference
HME

2003 Agenda

Thursday, February 20, 2003

5:00 pm – 7:30 pm	Registration
6:30 pm – 8:00 pm	Welcome Reception
	(Join us for Heavy Appetizers & Drinks)

Friday, February 21, 2003

7:00 am – 8:45 am	Registration – Continental Breakfast
8:45 am – 9:00 am	Welcome and Introductions
	Tammy Devine, V.P. of Marketing, QS/1
9:00 am – 10:15 am	**HIPAA Privacy**
	Michael D. Bell, Esq. of Mintz Levin
10:15 am – 10:45 am	Break
10:45 am – 12:00 pm	**SystemOne Training: Custom Reports**
	Missy Galloway, Trainer, QS/1
12:00 pm – 1:30 pm	Luncheon Provided
1:30 pm – 2:45 pm	**What You Need in the Event of an Audit**
	Andrea Stark, S.C. Ombudsman, Palmetto GBA
2:45 pm – 3:15 pm	Break
3:15 pm – 3:30 pm	**ABN/Meeting the Needs of Your Patient**
	John Willett, Territory Business Manager, Invacare
3:30 pm – 4:30 pm	**SystemOne Training: Daily, Weekly, Monthly Procedures**
	Duane Ridenour, Industry Analyst, QS/1

Saturday, February 22, 2003

7:45 am – 9:00 am	Continental Breakfast
9:00 am – 10:15 am	**Nebulizers/ Oxygen Continuum of Care**
	Joe King, Account Manager, Respironics
10:15 am – 10:45 am	Break
10:45 am – 12:00 pm	**Ostomy/ Wound Care**
	William Mays, Regional Sales Manager, ConvaTec
12:00 pm – 1:30 pm	Luncheon Provided
1:30 pm – 2:30 pm	**SystemOne 17.4 Review – A Whole New Look**
	Duane Ridenour, Industry Analyst, QS/1
2:30 pm – 3:00 pm	Break
3:00 pm – 4:00 pm	Questions & Answers

Tour of Charleston
Saturday February 22, 2003
7:00 pm - 9:00 pm
$30.00/ person

7:00 pm
Depart the Westin Francis Marion in horse drawn carriages. The carriages will bring you on a delightful tour through the historic district of Charleston. This fully narrated tour is the best way to see this lovely city.

8:00 pm
Carriage Tour will drop the group off in the Historic District and a registered tour guide will meet the group and begin the pub crawl. Your tour will begin with a brief history of Charleston's early settlement by a local tour guide.

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More Information to Come!

QS/1 PrimeCare Customer Conference 2002

Attended by over 100 customers and QS/1 staff members, the PrimeCare Customer Conference 2002 was a great success. These conferences are always a good opportunity for PrimeCare customers to meet with QS/1 staff members like the PrimeCare trainers and the PrimeCare support staff.

On Friday, attendees heard new information on the ASCP Foundation's Fleetwood Project, enhancing a LTC practice, electronic prescribing, interfaces, and, of course, HIPAA.

Saturday was the day for software review and preview, along with workshops. We reviewed 17.1 and 17.2 and previewed 17.3 and 17.4. Looking long term, we discussed where QS/1 plans to go with 17.5 and later.

Thanks to everyone who came to Atlanta for the conference. Plan to meet with us again in San Diego, where the PrimeCare Customer Conference 2003 will be held in conjunction with the QS/1 International Retail Customer Conference.

By: Jim Hancock, PrimeCare National Sales Manager, QS/1

The Canadian Perspective

The Home Medical Equipment (HME) Retail Industry: A Natural Extension to Community Pharmacy

Today, many pharmacies in Canada are profiting from a rapidly growing market segment, and QS/1 is there to help!

The community pharmacy has always been an ideal environment for retailing home medical equipment and services. HME is a natural extension to the pharmacy practice, building on an established relationship with the patient by offering a wider selection of healthcare products and services. It is not uncommon to wander into your local community drugstore and find products such as ostomy supplies, support stockings, back supports, and various mobility aids such as crutches, grab bars, walkers, and even wheelchairs.

In recent years, many pharmacy owners in Canada have identified a growth potential for HME business in their communities and have greatly expanded their home healthcare division to include a much wider variety of products and services. It is widely accepted that the demand for such products and services will continue to grow in the foreseeable future, due mainly to the following factors:

- According to Statistics Canada, the 80+ population group grew 41% to 932,000 from 1991 to 2001 and is expected to grow another 43% to 1.3 million in the next decade.

- Advances in technology and manufacturing have led to an explosion of new products on the market.

- With more and more options to choose from, consumers are increasingly looking for professionals to help them select just the right product and ensure proper fitting.

In the mid 1980s, QS/1 recognized the growth potential in the HME industry in the U.S. and developed a computer system known today as SystemOne to assist pharmacies in managing the HME segment of their business. The product has now been in Canada for nearly three years and has been adapted for Canadian third party billing and taxes. SystemOne tracks sales and rentals of home healthcare products; maintains patient profiles and charge accounts; controls inventory; bills third parties such as DVA, AADL, and NIHB; and produces valuable management data. Furthermore, SystemOne can be fully integrated with your QS/1 pharmacy system, reducing your equipment costs and offering the benefits of shared data such as patient demographics, inventory, doctors, and vendors.

Like any other business, the key to success in the HME industry is to fill a market need with the right product at the right price, back that product with professional service, and manage the business as efficiently as possible. In today's market, adding or expanding HME products and services is worth considering.

By: Tim Robichaud, Manager, Sales & Marketing, QS/1 Canada

TRADE SHOWS

**Medtrade
Atlanta, Ga.**

**NCPA: Nashville, TN
October 2002**

**ASCP: Anaheim, CA
November 2002**

From the Support Center

Visit our website at www.qs1.com and check out the FAQ, Frequently asked Questions, section.

RxCare Plus and PrimeCare:
Type RPTPRINT at Application Name to print customized report select, sort, and print options. Make sure to load the printer with plenty of paper. Use this information to re-enter saved customized reports as they were before a conversion.

Note: You will get a printout of all saved reports and all customized report select, sort and print options during the conversion process from 17.2 release to 17.4. After the conversion, the Select Previously Saved list will be blank and you will need to re-enter from the printed report. This is the last release required to reenter the save options for customized reports.

Communications:
For release 17.2 and higher, the 'Immediate Secondary Adjudication' on the secondary price code must be set to 'Y' to automatically change the other coverage field if the claim is rejected or is paid with a zero amount.

Quick ideas for 5.1 transmissions:
Verify that the PowerLine carrier code transmission program is QS5 for analog transmissions and QSI5 for Internet transmissions.
Load the 5.1 program diskette you received in the mail from QS/1.
Verify on page 3 of all price codes that the 'Crdholdr' option is set to 2.
You now have the ability to answer multiple DUR rejections. When answering the first DUR, the system displays 'Would you like to answer another DUR?' Type NO if you do not wish to respond. Press ENTER twice to send your responses to the third party.

POS:
Post your TCPIP address at each terminal. In the event a new boot diskette is required, this reduces time to get your register operational again.

SystemOne:
There are some useful new features on the Item Record and Transaction Run.

The new "In Repair" field on the Item Record screen allows you to indicate that a particular piece of equipment is out of service and has been sent for repair. Type N if the item is available for use. Type Y if the item has been sent for repair. System will default to N. You can also report on items you have sent to be repaired.

An additional Print Option has been added on the transaction run to enable you to first do a review of the run for verification purposes. At the Review/Update print option, type R to run the review of the transaction run. Change to U to update your rentals.

Hardware:
Coming soon to hardware: All new PCs will come with a read only DVD/CD-ROM. This will be a significant increase in space. The older CD-ROM readers read up to 600 megabytes and the new DVD readers read 9.4 gigabytes.

To verify you are getting a backup of your system, double click on My Computer. Look for a drive labeled 'drive Z,' BACKUPDRV, or 'Removable Storage Device.' Double click this drive and look for the date of the backup, typically at 3:00 a.m. each day. Right click on the .001 file and left click on 'Properties.' The date should be the date of the last backup. You can only see files created that day.

To look at each log created after each backup, double click on the ULTRBAC icon on the desktop. Left click 'Logs' and left click 'Backup.' Several text files display. Choose the log date needed and double click it. Verify you see the QS/1 folder and how much space it uses.

If you have any problems viewing these files, contact QS/1 Hardware Support at extension 250.

CRx:
To change all third parties from Internet to dial-up or vice versa, use menu path 7.6.5.7, Change Connection Type.

CMS:
In version 6.3 on your CMS System you can now identify the install date of latest Clinical Update. Click on the Tools option on the menu bar and choose Central Management Setup. The last clinical update date is found at the bottom of the Corp Info tab.

QS/1 Support 1.800.845.7558 • CRx Support 1.800.441.1995

Training Seminars

West Coast Region:

Valencia, CA: (866) 848-1942
01/14/2003	RxCare Plus: A/R and 3rd Party Reconciliation
02/11/2003	RxCare Plus: Basic Operations
03/11/2003	Point-of-Sale: Basic Operations
04/08/2003	RxCare Plus: Workflow
05/13/2003	Nursing Home Processing
06/10/2003	RxCare Plus: Drug Inventory

Mid-Atlantic Region:

Indianapolis, IN: (800) 637-5251
01/14 - 01/15/2003	SystemOne: 17.4, A New Look
01/16/2003	SystemOne: Basic Supply

Lexington, KY: (866) 441-7011
02/11/2003	SystemOne: Basic Supply
02/12 - 02/13/2003	SystemOne: 17.4, A New Look

Richmond, VA: (877) 392-5851
03/04 - 03/05/2003	SystemOne: 17.4, A New Look
03/06/2003	SystemOne: Basic Supply

Midwest Region:

St. Paul, MN: (800) 541-5358
01/21/2003	RxCare Plus: Basic Operations
01/22/2003	PrimeCare: Overview and Enhancements
02/13/2003	RxCare Plus: Enhancements
02/18/2003	RxCare Plus: Reports and File Maintenance
03/18/2003	RxCare Plus: AR and Reconciliation
04/15/2003	RxCare Plus: Store Information Review and Reveal

Southeast Region:

Spartanburg, SC: (800) 889-9183
01/21 - 01/22/2003	SystemOne: Entry Level or 17.4, A New Look
01/23 - 01/24/2003	SystemOne: Entry Level or 17.4, A New Look
02/18 - 02/19/2003	SystemOne: Entry Level or 17.4, A New Look
02/25 - 02/26/2003	SystemOne: Entry Level or 17.4, A New Look

Northeast Region:

Sturbridge, MA: (800) 648-77428
02/19/2003	RxCare Plus: Refresher/Enhancements
04/16/2003	RxCare Plus: AR/Third Party Reconciliation

Mechanicsburg, PA: (717) 795-2700
01/15/2003	RxCare Plus: Refresher/Enhancements
03/19/2003	RxCare Plus: AR/Third Party Reconciliation

Trade Shows

Aruba
January 16 - 20, 2003: NCPA Pharmacy Chain Conference

Des Moines, IA
January 18, 2003: Iowa Pharmacy Association Educational Expo

Eugene, OR
January 18 - 19, 2003: Lane County

Orlando, FL
January 23-25, 2003: Associated Living Pharmacy Association

Key Biscayne, FL
January 23-26, 2003: NACDS Regional Chain Conference

Las Vegas, NV
February 2-5, 2003: National Grocers Association

San Antonio, TX
February 2-6, 2003: NCPA Expo 2003

Dearborn, MI
February 21-23, 2003: Michigan Pharmacist Association

Phoenix, AZ
March 1-5, 2003: NCPDP

New Orleans, LA
March 28- April 1, 2003: APhA

Las Vegas, NV
May 7-8, 2003: Medtrade

Tampa, FL
May 14-16, 2003: ASCP

Miami, FL
May 27-31, 2003: ACHA

Go to www.qs1.com, QS/1's web site, for the most current training and trade show information.

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