

Department of Veterans Affairs

ePayments Compliance

Requirements Specification Document



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Version 2.1

Revision History

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1. Introduction

The Chief Business Office (CBO) requested enhancements to the Veterans Health Administration's (VHA) Veterans Health Integrated Systems and Technology Architecture (VistA) Third Party Electronic Data Interchange (EDI) Lockbox module of ePayments to increase timely and accurate processing of payments in compliance with the Healthcare Insurance Portability and Accountability Act (HIPAA) of 1996 and VHA fiscal accounting policies.

1.1. Purpose

The purpose of this Requirement Specification Document (RSD) is to outline the requirements for the ePayments Compliance project.

The target audience for this RSD includes the Office of Enterprise Development (OED), Product Support, Software Quality Assurance, the CBO, Financial Services Center (FSC) technical support staff, and the end users.

1.2. Scope

The ePayments software will be updated to address business needs of the Department of Veterans Affairs to maintain compliance with legislative and federal mandates, and to address inefficiencies in the current process by:

- 1) Increasing automation of third party payer medical claims processing
 - a) Automatic posting
 - b) Automatic decrease adjustments
 - c) Automatically match payment/retraction pairs found within the same ERA
- 2) Addressing issues with existing ePayments process for pharmacy claims
 - a) Automatic matching of pharmacy 835 response with the ECME claim
- 3) Increasing automation of pharmacy claims processing
 - a) Process standard NCPDP pharmacy fees
 - b) Manage non-released prescriptions
 - c) Streamline processing of ePharmacy 835 reversals by matching payment/retraction pairs found within the same ERA
 - d) Manage matching rejections due to the payer including rejected claims on the ERA by matching payment/retraction pairs found within the same ERA
- 4) Enabling a switch-back solution through implementation of parameter questions
- 5) Add new functionality to EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad
- 6) Add new functionality to EDI LOCKBOX 3RD PARTY EXCEPTIONS [RCDPE EXCEPTION PROCESSING]

The increased automation of current processes is necessary to improve productivity of Accounts Receivable (AR) staff and increase accuracy of the revenue operation.

1.3. References

- **Original Business Requirements Document (BRD):** [EDI New Standards and Operating Rules VHA Provider-Side Technical Compliance Requirements; NSR #20110503](#)
- **Revised BRD:** [REDACTED]
- **HIPAA**
<http://www.gpo.gov/fdsys/pkg/PLAW-104publ191/pdf/PLAW-104publ191.pdf>
 - HIPAA: New Transaction Standards (5010, D.O); Department of Health and Human Services 45 Code of Federal Regulations (CFR) Part 162 Health Insurance Reform; Modifications to the HIPAA; Final Rules
<http://edocket.access.gpo.gov/2009/pdf/E9-740.pdf>
 - HIPAA: New Code Set [International Classification of Diseases, Tenth Edition (ICD-10)]; HHS Office of the Secretary, 45 CFR Part 162 [CMS-0013-F] RIN 0958-AN25 HIPAA Administrative Simplification: Modifications to Medical Data Code Set, Standards to Adopt ICD-10-Clinical Modification (CM), and ICD-10-Procedure Coding System (PCS)
<http://edocket.access.gpo.gov/2009/pdf/E9-743.pdf>
- **Patient Protection and Affordable Care Act (PPACA) of 2010--"Health Care Reform" House of Representatives (H.R.) 3590, Section 1104--Administrative Simplification, Section 10109--Development of Standards for Financial and Administrative Transactions**
 - Public Law 111-148, The Patient Protection and Affordable Care Act of 2010 (PPACA) <http://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf>
 - PPACA Compliance, Certification, and Penalties
https://www.cms.gov/Affordable-Care-Act/04_ComplianceCertificationandPenalties.asp
- **The Department of Veterans Affairs M Programming Standards and Conventions**

2. Overall Description

2.1. Accessibility Specifications

The enhancements described in this document do not contain any specification for functionality that is affected by 508 Compliance, and the 508 Program Office has granted the project a waiver from the 508 Compliance because there is no user interface.

2.2. Business Rules Specification

Refer to the section on Functional Specifications for business rules.

2.3. Design Constraints Specification

The enhancements to the ePayments system should be compliant with the regulations mandated by HIPAA.

2.4. Disaster Recovery Specification

There are no disaster recovery requirements specific to this development effort. The affected modules are integrated parts of the overall VistA system that are already covered by disaster-recovery plans, which are not affected by the enhancements described in this RSD.

2.5.Documentation Specifications

Existing user manuals will be updated as necessary to reflect the enhancements described in this document. The following manuals will be evaluated for possible updating:

- BPS Technical Manual/Security Guide
- BPS User Manual
- PSO Technicians User Manual
- PSO Managers User Manual

PSO Pharmacist User Manual

- PSO Technical Manual/Security Guide
- IB User Manual
- IB Technical Manual
- AR Technical Manual/Security Guide
- ePayments User Manual (EDI Lockbox)

2.6.Functional Specifications

2.6.1.System Feature: Site Parameters for Medical Auto-Post

2.6.1.1. Requirement: Parameter for Auto-posting Medical Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a parameter question to allow sites to enable or disable auto-posting of third party medical claims with an initial default value of enabled.

NUMBER OF DAYS EFT UNMATCHED: 5// NUMBER OF DAYS ERA UNMATCHED: 7// ENABLE AUTO-POSTING OF MEDICAL CLAIMS (Y/N): Y//
--

The question for auto-posting of medical claims should come after the two existing parameter questions. The system should initialize to YES and the first default for auto-posting should be YES. After the user answers the question, that new answer should be used as the next default value.

2.6.1.2. Requirement: Notification of Edits for Parameter for Auto-posting Medical Claims

The system shall send an Outlook email to distribution group [REDACTED] if a site changes the parameter question to enable or disable auto-posting of third party medical claims.

2.6.1.3. Requirement: Parameter for Excluding Payers from Auto-posting of Medical Claims

If auto-posting of third party medical claims is enabled for the site the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a parameter question to allow sites to exclude specific payers from auto-posting of third party medical claims by selecting payer name or payer ID.

If auto-posting of medical claims is set to NO, do not display excluded payers and do not prompt for PAYER.

If auto-posting of medical claims is set to YES and there are no excluded payers, display a message and prompt for PAYER.

NUMBER OF DAYS EFT UNMATCHED: 5//
NUMBER OF DAYS ERA UNMATCHED: 7//

ENABLE AUTO-POSTING OF MEDICAL CLAIMS (Y/N): Y//
NO EXCLUDED PAYERS

Select a Payer to add or remove from the exclusion list.
PAYER:

If auto-posting of medical claims is set to YES and there are excluded payers, display excluded payers and prompt for PAYER.

Allow the user to enter a partial name and display matches by showing the name and the ID.

ENABLE AUTO-POSTING OF MEDICAL CLAIMS (Y/N): Y//
EXCLUDED PAYERS:
INSURANCE OF ARIZONA 4444
INSURANCE OF KANSAS 2222

Select a Payer to add or remove from the exclusion list.
PAYER: INSURANCE OF A
1 INSURANCE OF ALABAMA 3333
2 INSURANCE OF ARIZONA 4444
CHOOSE 1-2: 2 INSURANCE OF ARIZONA 4444
COMMENT: Comment goes here. Enter justification for Arizona.
Insurance of Arizona - 4444 has been added to the list of Excluded Payers.
If auto-decrease is turned on, this payer will be excluded from auto-decrease too.

Treat the PAYER prompt as a toggle. If the user enters a payer that is already listed, remove the payer from the list. If the user enters a payer that is not listed, add the payer to the list.

EXCLUDED PAYERS:
INSURANCE OF ARIZONA 4444
INSURANCE OF KANSAS 2222

Select a Payer to add or remove from the exclusion list.
PAYER: INSURANCE OF KANSAS 2222
COMMENT: Comment goes here. Enter justification for Kansas.
Insurance of Kansas - 2222 has been removed from the list of Excluded Payers.
If auto-decrease is turned on, this payer will no longer be excluded from auto-decrease.

Select a Payer to add or remove from the exclusion list.
PAYER: INSURANCE OF ALABAMA 3333
COMMENT: Comment goes here. Enter justification for Alabama.
Insurance of Alabama - 3333 has been added to the list of Excluded Payers.
If auto-decrease is turned on, this payer will be excluded from auto-decrease too.

Select a Payer to add or remove from the exclusion list.
PAYER:

When the user presses enter without entering a payer, list the excluded payers a second time if there were any changes to the list.

Select a Payer to add or remove from the exclusion list.
PAYER:

EXCLUDED PAYERS:
INSURANCE OF ALABAMA 3333
INSURANCE OF ARIZONA 4444

If the user turns on auto-posting, excludes payers and turns auto-posting off, then keep the excluded payers but do not display the excluded payers unless auto-posting is turned on again.

2.6.1.4. Requirement: Default Parameter for Excluding Payers from Auto-posting of Medical Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall neither require excluded payers nor contain default excluded payers.

2.6.1.5. Requirement: Comment for Excluding Payers from Auto-posting of Medical Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a comment question that is required if a user adds or removes a payer exclusion from auto-posting of third party medical claims.

2.6.1.6. Requirement: Security Key for Parameter for Auto-posting of Medical Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall require a user to hold security key RCDPE AUTO DEC to edit any parameter question concerning auto-posting of third party medical claims. The key will be required at the menu option level.

2.6.1.7. Requirement: Audit for Auto-posting of Medical Claims

The system shall capture and maintain an audit trail of the user name, user initials, date, time, previous value, new value, and/or addition or deletion of payer exclusions for each edit of a parameter associated with auto-posting of medical claims.

2.6.2. System Feature: Site Parameters for Medical Auto-Decrease

2.6.2.1. Requirement: Parameter for Auto-decrease of Medical Claims

If auto-posting of third party medical claims is enabled for the site, the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a parameter question to allow sites to enable or disable auto-decrease of third party medical claims, with an initial default value of disabled.

NUMBER OF DAYS EFT UNMATCHED: 5//
NUMBER OF DAYS ERA UNMATCHED: 7//

ENABLE AUTO-POSTING OF MEDICAL CLAIMS (Y/N): Y//
NO CURRENTLY EXCLUDED PAYERS

Select a Payer to add or remove from the exclusion list.
PAYER:

ENABLE AUTO-DECREASE OF MEDICAL CLAIMS (Y/N): N//

The first default for auto-decrease should be NO. After the user answers the question, that new answer should be used as the next default value.

The question should only display if auto-posting of third party medical claims is enabled.

2.6.2.2. Requirement: Parameter for Auto-decrease Timeframe of Medical Claims

If auto-decrease of third party medical claims is enabled for the site, the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a parameter question to allow sites to specify the number of days to wait before an automatic decrease adjustment is made for a third party medical claim, with an initial default value of null and a required response of 0 to 7 days.

The question should only display if auto-decrease of third party medical claims is enabled.

The number of days should be the number of days that have elapsed since auto-posting completed.

2.6.2.3. Requirement: Parameter for Auto-decrease Amount of Medical Claims

If auto-decrease of third party medical claims is enabled for the site, the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a parameter question to allow sites to specify the maximum claim dollar amount of an automatic decrease adjustment that is made for a third party medical claim, with an initial default value of null and a required response from 1 to 1500 dollars.

The question should only display if auto-decrease of third party medical claims is enabled.

The dollar amount should be represented without cents.

ENABLE AUTO-DECREASE OF MEDICAL CLAIMS (Y/N): Y//
NUMBER OF DAYS TO WAIT BEFORE AUTO-DECREASE (0-7):
MAXIMUM DOLLAR AMOUNT TO AUTO-DECREASE (1-1500):

2.6.2.4. Requirement: Parameter for Excluding Payers from Auto-decrease of Medical Claims

If auto-decrease of third party medical claims is enabled for the site, the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a parameter question to allow sites to exclude specific payers from auto-decrease of third party medical claims by selecting payer name or payer ID.

The auto-decrease exclusion of payers should work the same way as the auto-post exclusion of payers. Reference 2.6.1.3.

2.6.2.5. Requirement: Default Parameter for Excluding Payers from Auto-decrease of Medical Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall neither require payers nor contain default payers for the parameter question to allow sites to exclude specific payers from auto-decrease of third party medical claims.

2.6.2.6. Requirement: Comment for Excluding Payers from Auto-decrease of Medical Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a comment question that is required if a user adds or removes a payer exclusion from auto-decrease of third party medical claims.

2.6.2.7. Requirement: Security Key for Parameter for Auto-decrease of Medical Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall require a user to hold security key RCDPE AUTO DEC to edit any parameter question concerning auto-decrease of third party medical claims. The key will be required at the menu option level.

2.6.2.8. Requirement: Audit for Auto-decrease of Medical Claims

The system shall capture and maintain an audit trail of the user name, date, time, previous value, new value, and/or addition or deletion of payer exclusions for each edit of a parameter associated with auto-decrease of medical claims.

2.6.3. System Feature: Site Parameters for Pharmacy Auto-Post

2.6.3.1. Requirement: Parameter for Auto-posting Pharmacy Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall display an informational parameter to show that auto-posting for Pharmacy claims is disabled. This line is informational and cannot be edited.

NUMBER OF DAYS EFT UNMATCHED: 5// NUMBER OF DAYS ERA UNMATCHED: 7// ENABLE AUTO-POSTING OF MEDICAL CLAIMS (Y/N): N// ENABLE AUTO-DECREASE OF MEDICAL CLAIMS (Y/N): N// ENABLE AUTO-POSTING OF PHARMACY CLAIMS (Y/N): N
--

The informational parameter for auto-posting of pharmacy claims should come after the auto-decrease of medical claims parameter questions.

2.6.4. System Feature: Posting Prevention

2.6.4.1. Requirement: Posting Prevention for Medical Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a parameter question to allow sites to set the number of calendar days beyond which unposted medical payments (EFTs) will prevent the user from posting newer medical EFTs without posting the older payments first.

A value of 21 will be filed with the patch installation. The user can reset the value to a number between 14 and 99, inclusive, but the user cannot delete the value.

This requirement is related to requirement 2.6.9.6.

NUMBER OF DAYS EFT UNMATCHED: 5//
NUMBER OF DAYS ERA UNMATCHED: 7//

ENABLE AUTO-POSTING OF MEDICAL CLAIMS (Y/N): N//
ENABLE AUTO-DECREASE OF MEDICAL CLAIMS (Y/N): N//

ENABLE AUTO-POSTING OF PHARMACY CLAIMS (Y/N): N

NUMBER OF DAYS (AGE) OF UNPOSTED MEDICAL EFTS TO PREVENT POSTING: 21//

2.6.4.2. Requirement: Posting Prevention for Pharmacy Claims

The EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS] shall contain a parameter question to allow sites to set the number of calendar days beyond which unposted pharmacy payments (EFTs) will prevent the user from posting newer pharmacy EFTs without posting the older payments first.

A value of 30 will be filed with the patch installation. The user can reset the value to a number between 21 and 99, inclusive, but the user cannot delete the value. This requirement is related to requirement 2.6.9.8.

NUMBER OF DAYS EFT UNMATCHED: 5//
NUMBER OF DAYS ERA UNMATCHED: 7//

ENABLE AUTO-POSTING OF MEDICAL CLAIMS (Y/N): N//
ENABLE AUTO-DECREASE OF MEDICAL CLAIMS (Y/N): N//

ENABLE AUTO-POSTING OF PHARMACY CLAIMS (Y/N): N

NUMBER OF DAYS (AGE) OF UNPOSTED MEDICAL EFTS TO PREVENT POSTING: 21//
NUMBER OF DAYS (AGE) OF UNPOSTED PHARMACY EFTS TO PREVENT POSTING: 30//

2.6.5. System Feature: Site Parameter Reporting

2.6.5.1. Requirement: Report for Auto-processing

The SITE PARAMETER EDIT [PRCA SITE PARAMETER] menu shall contain a new option of EDI Lockbox Parameters Report [PRCA SITE PARAMETER REPORT] to display or print the EDI Lockbox Parameters.

2.6.5.2. Requirement: Report for Auto-processing Audit

The SITE PARAMETER EDIT [PRCA SITE PARAMETER] menu shall contain two new options of EDI Lockbox Parameters Audit Report [PRCA SITE PARAMETER AUDIT REPORT] and EDI Lockbox Exclusion Audit Report [PRCA SITE EXCLUSION AUDIT REPORT] to display or print the EDI Lockbox Parameters audit.

2.6.5.3. Requirement: Database for Payer

The system shall include a database of payer names, payer IDs, and the date on which the payer was added to the database, stored in such a way that allows for user selection of a name or payer ID.

2.6.5.4. Requirement: Populate Database for Payer

The system shall populate entries into the database using information from the ERA table.

2.6.5.5. Requirement: Maintain Database for Payer

The system shall maintain the database in such a way that new payers in the file ELECTRONIC REMITTANCE ADVICE (344.4) are available for user selection.

2.6.5.6. Requirement: Add Exclusion of all Payers for IOC

For all new parameter questions that exclude by payer, the system shall provide a way for field test sites to start testing with all payers excluded, filing with a user name of POSTMASTER and a comment of "Auto Addition - Beginning of Field Test / IOC". This addition of all payer exclusions will not be available to sites after national release.

2.6.5.7. Requirement: Remove Exclusion of all Payers for IOC

For all new parameter questions that exclude by payer, the system shall provide a way for field-test sites to remove all payer exclusions, filing with a user name of POSTMASTER and a comment of "Auto Deletion - End of Field Test / IOC". This removal of all payer exclusions will not be available to sites after national release.

2.6.5.8. Requirement: Report for Payers

The EDI LOCKBOX REPORTS MENU [RCDPE EDI LOCKBOX REPORTS MENU] shall contain a new option of PAYER EXCLUSION NAME / ID REPORT [RCDPE PAYER EXCLUSION NAME ID] to show the payers, with columns for payer name, payer ID, and the date on which the payer was added to the database.

Select EDI Lockbox Reports Menu Option: Payer Exclusion Name / ID Report		
DEVICE: HOME// UCX/TELNET Right Margin: 80//		
PAYER EXCLUSION NAME / ID REPORT		Page: 1
RUN DATE: 11/27/13@18:47:14		
PAYER ID	PAYER NAME	DATE ADDED
=====		
111111	PAYER NAME ONE	11/27/13
222222	PAYER NAME TWO	11/27/13
333333	PAYER NAME THREE	11/27/13
444444	PAYER NAME FOUR	11/27/13
Enter RETURN to continue or '^' to exit:		

2.6.6.System Feature: Transfer EEOB

2.6.6.1. Requirement: Remove Transfer EEOB

The EDI LOCKBOX 3RD PARTY EXCEPTIONS [RCDPE EXCEPTION PROCESSING] ListManager screen for Data Exceptions shall no longer contain the action Transfer EEOB; although, the coding executed by the action shall remain on the system.

2.6.6.2. Requirement: Remove EEOB Transfer Report

The EDI LOCKBOX REPORTS MENU [RCDPE EDI LOCKBOX REPORTS MENU] shall no longer contain the option EEOB TRANSFER REPORTS [RCDPE EOB TRANSFER REPORTS]; although, the coding executed by the option shall remain on the system.

2.6.7.System Feature: Exception List

2.6.7.1. Requirement: Security Key for Delete Message Action

The EDI LOCKBOX 3RD PARTY EXCEPTIONS [RCDPE EXCEPTION PROCESSING] action of Delete Message shall require new security key RCDPE ERA EXCEPT.

2.6.7.2. Requirement: Restrict Delete Message Action

The EDI LOCKBOX 3RD PARTY EXCEPTIONS [RCDPE EXCEPTION PROCESSING] action of Delete Message shall display an error message and return the user to the main screen under the following conditions:

Electronic Remittance Advice (ERA) is matched to Electronic Fund Transfer (EFT)

Select EDI LBox EEOB Transmission Exception: 2
Deletion is not allowed. The ERA is matched to an EFT.

ERA has a payment method of Automatic Clearing House (ACH)

Select EDI LBox EEOB Transmission Exception: 2
Deletion is not allowed. The ERA has a payment method of ACH.

2.6.7.3. Requirement: Transfer Message

The system shall no longer display the transfer message for data exceptions.

LOCKBOX EEOB DATA EXCEPTIONS		Nov 27, 2013@16:01:40	Page: 2 of 2
EEOB DETAIL DATA WITH EXCEPTION CONDITIONS			
#	Trace #	EOB Date	
+	Insurance Co Name/ID		
7	999999995523333333	9/20/10	
FEDERAL EMPLOYEES HEALTH /1382242132			
Seq #:	1	Bill: *ECME1234566	Pt: PUBLIC,JOHN Q Pd: 12.24
**Exception: VALID BILL NOT FOUND (TRANSFER NEEDED IF NOT YOURS)			

2.6.7.4. Requirement: Filter Question

The system shall have a filter question for medical or pharmacy before displaying the exceptions.

INCLUDE EXCEPTIONS FOR (M)EDICAL, (P)HARMACY, OR (B)OTH:

2.6.7.5. Requirement: Pharmacy Claim Comment Action

The EDI LOCKBOX 3RD PARTY EXCEPTIONS [RCDPE EXCEPTION PROCESSING] screen for data exceptions shall contain an action for Pharmacy Claim Comment that allows a user to enter a one line comment for a non-released prescription.

View/Print Message	Transfer EEOB	Pharmacy Claim Comment
File EEOB in IB	Edit Claim #	Exit
Remove Exception	TPJI	
Select Action: Next Screen// ph Pharmacy Claim Comment		
Select EDI LBox EEOB Data Exception(s): (1-4): 2		
Selection #: 2 7777777		
Comment: This is a pharmacy comment for bill #7777777 that will display on the screen.		

Only the most recent comment will be stored and displayed.

2.6.7.6. Requirement: Display Pharmacy Data

The EDI LOCKBOX 3RD PARTY EXCEPTIONS [RCDPE EXCEPTION PROCESSING] screen for data exceptions shall display the following for pharmacy claims: ECME number, release date, comment.

LOCKBOX EEOB DATA EXCEPTIONS Dec 18, 2013@08:57:36		Page: 1 of 3
EEOB DETAIL DATA WITH EXCEPTION CONDITIONS		
#	Trace #	EEOB Date
-----Insurance Co Name/ID-----		
1	63025	
AETNA/1234567890		
Seq #:	2	Bill: *7777777 Pt: ARPATIENT,ONE Pd: 43.36
ECME #:	76523098	Release Date: 12/16/10
Comment: Pharmacy comment goes here.		
**Exception: VALID BILL NOT FOUND (TRANSFER NEEDED IF NOT YOURS)		

2.6.8.System Feature: Verification of EEOB Detail against Bill Detail

2.6.8.1. Requirement: Remove Case Sensitivity

The system shall automatically perform verification of the EEOB detail against the bill detail without regard to case sensitivity for the first five characters of the patient's last name, date of service, bill number or claim number, social security number or patient ID, and the amount billed.

2.6.9.System Feature: EEOB Worklist

2.6.9.1. Requirement: Remove Adjust (Inc/Dec) Action

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] shall no longer contain the action Adjust (Inc/Dec) on the Research Menu ListManager screen; however, the coding executed by the action shall remain on the system.

2.6.9.2. Requirement: Exception Indicator

The system shall display an "x" indicator before the ERA number on the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] if any exception exists for the ERA.

There is no need to display "-" with the indicator for an exception. Once the exception is resolved, the indicator of "x" should no longer display and the "-" should display next to the ERA number to indicate that there is no scratchpad.

#	ERA #	TRACE#	PAYER NAME/MATCH STATUS	ERA PAID DT	TOT AMT PAID	DT REC'D
1	x4667	000032974		3/31/05	7.46	3/31/05
		THE COMMUNITY HOSPITAL		APPROX # EEOBs: 1		

2.6.9.3. Requirement: Exception Error Message

If a data exception exists for a medical ERA, the system shall deny a user access to select that medical ERA from the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] by displaying the following message, requiring the user to press enter to continue and return the user to the Worklist display:

ACCESS DENIED: Scratchpad creation is not allowed when Exceptions exist.
Fix Transmission Exceptions first and then Data Exceptions via the EXC EDI Lockbox 3rd Party Exceptions option, located on the EDI Lockbox Main Menu.

Press enter to continue.

2.6.9.4. Requirement: Warning for View/Print ERA

If a data exception exists for a medical ERA, the system shall display a warning for action View/Print ERA on the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] by displaying the following message, requiring the user to press enter to continue before viewing and/or printing:

WARNING: Fix Transmission Exceptions first and then Data Exceptions via the EXC EDI Lockbox 3rd Party Exceptions option, located on the EDI Lockbox Main Menu.

Press enter to continue.

2.6.9.5. Requirement: Posting Warning for Medical Claims

If there are unposted payments (EFTs) associated with third party medical claims more than 14 calendar days old, the system shall display a warning message for action Select ERA on the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST], requiring the user to press enter to continue:

WARNING: Unposted EFTs exist that are more than 14 days old. Post the older payments first. The EFTs may be matched or unmatched.

Trace#, Trace#, Trace#

Press enter to continue.

Unmatched EFTs, since they have not yet been matched with an ERA record, will be handled as though they are associated with third party medical claims.

Do not consider EFTs that are older than two months prior to national release.

2.6.9.6. Requirement: Posting Prevention for Medical Claims

If there are unposted payments (EFTs) associated with third party medical claims, aged more than the number of days specified in site parameters, the system shall display an error message for action Select ERA on the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST], requiring the user to press enter:

ERROR: Unposted EFTs exist that are more than 21 days old. Scratchpad creation is not allowed for newer payments. Post older payments first. The EFTs may be matched or unmatched.

Trace#, Trace#, Trace#

Press enter to continue.

If the user has selected an ERA that is 14 days or older, allow the user to create the scratchpad.

If an override exists, allow the user to create the scratchpad.

If the user has selected an ERA that has been received within 14 days and there is no override, return the user to the ListManager screen.

Unmatched EFTs, since they have not yet been matched with an ERA record, will be handled as though they are associated with third party medical claims.

Do not consider EFTs that are older than two months prior to national release.

2.6.9.7. Requirement: Posting Warning for Pharmacy Claims

If there are unposted payments (EFTs) associated with pharmacy claims more than 21 calendar days old, the system shall display a warning message for action Select ERA on the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST], requiring the user to press enter to continue:

WARNING: Unposted EFTs exist for pharmacy claims that are more than 21 days old. Post the older payments first.

Trace#, Trace#, Trace#

Press enter to continue.

Do not consider EFTs that are older than two months prior to national release.

2.6.9.8. Requirement: Posting Prevention for Pharmacy Claims

If there are unposted payments (EFTs) associated with pharmacy claims, aged more than the number of days specified in site parameters, the system shall display an error message for action Select ERA on the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST], requiring the user to press enter to continue:

ERROR: Unposted EFTs exist for pharmacy claims that are more than 30 days old. Scratchpad creation is not allowed for newer payments. Post older payments first.

Trace#, Trace#, Trace#

Press enter to continue

If the user has selected an ERA that is 21 days or older, allow the user to create the scratchpad.

If an override exists, allow the user to create the scratchpad.

If the user has selected an ERA that is has been received within 21 days and there is no override, return the user to the ListManager screen.

Do not consider EFTs that are older than two months prior to national release.

2.6.9.9. Requirement: Rename the Option

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] shall be renamed to ERA WORKLIST [RCDPE EDI LOCKBOX WORKLIST].

2.6.9.10. Requirement: Split/Edit Action

The system shall transfer the correct payer information when splitting or editing an EEOB with different payer names. The correct payer information matches the information sent with the ERA.

2.6.9.11. Requirement: Display ECME Number

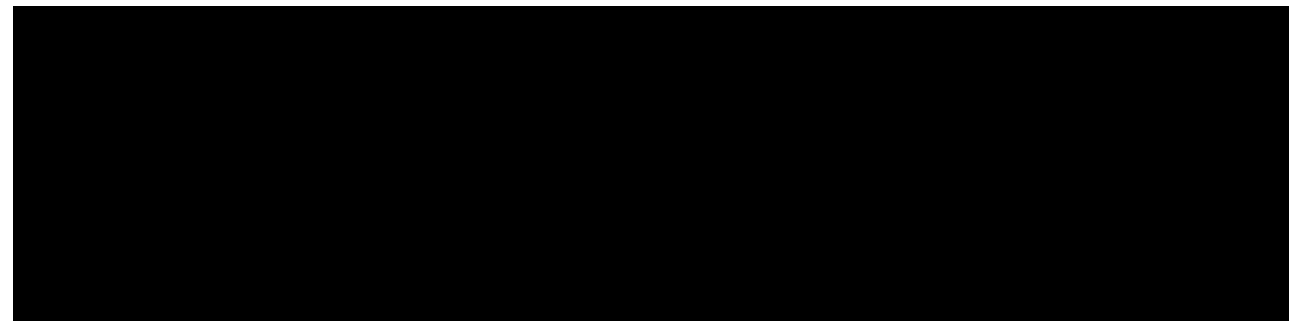
The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] ListManager screen shall display the ECME number for pharmacy claims.

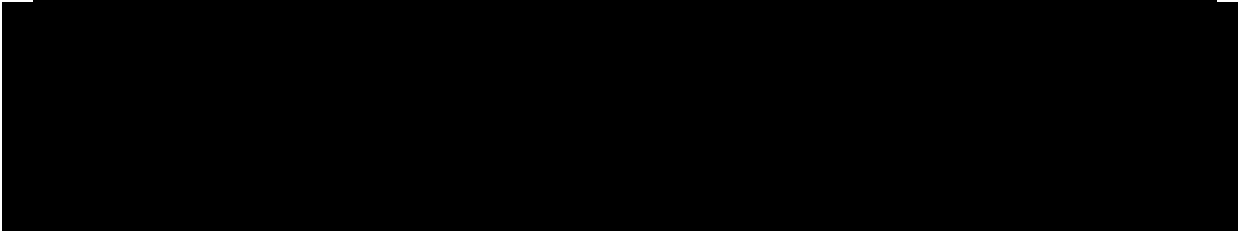
	ERA#. Seq Payer Name/ID	Clai m#	Post Amt	Post Date	Un-Post Bal
1	87705.1 EXPRESS ECME #:	K307YUC SCRIPTS/1390138065 88872829	3000.41	11/1/13	127.44

This requirement has been removed because the ECME# needs to be displayed at the EEOB level, not the ERA level. The requirement will remain in the RSD to preserve numbering.

2.6.9.12. Requirement: View/Print ERA Displays ECME Number

The system shall display the ECME number for pharmacy claims for action View/Print ERA on the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST].





```
Enter RETURN to continue or '^' to exit:
```

2.6.9.13. Requirement: Remove Batch Question

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] action to Select ERA shall no longer allow the user to split the ERA into batches.

2.6.9.14. Requirement: Remove Hide/Display Batch Action

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] shall no longer contain the action Hide/Display Batch; however, the coding executed by the action shall remain on the system.

2.6.10. System Feature: Unposted Payment Override

2.6.10.1. Requirement: New Option

The system shall contain new option UNPOSTED EFT OVERRIDE [RCDPE UNPOSTED EFT OVERRIDE] that will be available to user who holds security key RCDPE AGED PMT.

2.6.10.2. Requirement: New Option Text

UNPOSTED EFT OVERRIDE [RCDPE UNPOSTED EFT OVERRIDE] shall display current error and/or warning messages, prompt the user to override for Medical or Pharmacy and require an override reason.

Current Warning and/or Error messages for Unposted EFTs:

WARNING: Unposted EFTs exist for pharmacy claims that are more than 21 days old.

ERROR: Unposted EFTs exist for third party medical claims that are more than 21 days old. Scratchpad creation is not allowed for newer payments.

An override will allow unrestricted scratchpad creation for one day.

Do you want to continue (Y/N)?

Override for (M)edical or (P)harmacy?

Reason for Override:

File comment, the user name and date/time stamp.

The override is not payer specific.

2.6.10.3. Requirement: Outlook Message

The system shall send an Outlook message when an override occurs, using distribution groups specified when the patch is installed into production.

```
Subject: EDI LBOX-STA# 500-Unposted EFTs Override 11/15/13@19:02

Current Warning and/or Error messages for Unposted EFTs:

    WARNING: Unposted EFTs exist for pharmacy claims that are
    more than 21 days old.

    ERROR: Unposted EFTs exist for third party medical claims that are
    more than 21 days old. Scratchpad creation is not allowed for newer
    payments.

Medical Override Details
User: Lastnm, Firstnm
Date/Time: 11/15/13@19:00
Reason for Override: Short staffed due to event XYZ
```

2.6.11. System Feature: Select ERA Question

2.6.11.1. Requirement: Select ERA Question

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] action to Select ERA shall display the following question, with no default, when a user selects an ERA that does not have a scratchpad:

```
NO WORKLIST SCRATCHPAD ENTRY EXISTS FOR THIS ERA
(C)REATE SCRATCHPAD, (V)IEW ERA DETAILS or (E)XIT:
```

2.6.11.2. Requirement: Create Scratchpad

The action to Select ERA shall create a scratchpad using existing functionality, if the user selects CREATE SCRATCHPAD.

2.6.11.3. Requirement: View ERA Details

The action to Select ERA shall execute the functionality for action VIEW/PRINT ERA, if the user selects VIEW ERA DETAILS and does not create a scratchpad.

2.6.11.4. Requirement: Exit

The action to Select ERA shall return the user to the EEOB Worklist, if the user selects EXIT or presses enter without a selection or enters "^".

2.6.12. System Feature: EEOB Worklist Filter

2.6.12.1. Requirement: Change View Action

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] ListManager screen shall contain a new action, Change View, to filter the data displayed, based on the user's response to the Change View questions.

The Change View action should be specific to a user.

2.6.12.2. Requirement: Move Current Filter Questions

The Change View action shall contain the following questions instead of prompting the user each time the worklist is accessed:

ERA POSTING STATUS: UNPOSTED//
ERA-EFT MATCH STATUS: BOTH//
LIMIT THE SELECTION TO A DATE RANGE WHEN THE ERA WAS RECEIVED?: NO//
(A)LL PAYERS, (R)ANGE OF PAYER NAMES: ALL//

The question of “(L)ist or (S)pecific” should still be displayed each time a user accesses the worklist.

2.6.12.3. Requirement: Auto-Posting, Non Auto-Posting or Both

The Change View action shall contain a question for Auto-posting, Non Auto-posting or Both:

DISPLAY (A)UTO-POSTING, (N)ON AUTO-POSTING, OR (B)OTH: B//

2.6.12.4. Requirement: Medical, Pharmacy or Both

The Change View action shall contain a question for Medical, Pharmacy or Both:

(M)EDICAL, (P)HARMACY, OR (B)OTH: M//

2.6.12.5. Requirement: Preferred View

The Change View action shall contain a required question to save as a preferred view and store the answers to the Change View questions if the user answers "Y":

DO YOU WANT TO SAVE THIS AS YOUR PREFERRED VIEW (Y/N)?:

The preferred view should be specific to a user.

2.6.12.6. Requirement: Preferred View Initialization

When a user selects the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] option, the system shall execute the Change View action if the user does not have a preferred view.

2.6.12.7. Requirement: Filter Displayed in Heading

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] ListManager screen shall display a line at the top of the heading to indicate the Change View display selected by the user:

SELECTED:	MATCH STATUS: BOTH	POST STATUS: UNPOSTED
	DATE RANGE : NONE SELECTED	AUTO- POSTED & NON AUTO- POSTED
	MEDICAL & PHARMACY CLAIMS	
	ALL PAYERS	

2.6.13. System Feature: ERA Unmatched Aging Report

2.6.13.1. Requirement: Exception Indicator

The system shall display an "x" indicator before the AGED DAYS on the ERA UNMATCHED AGING REPORT [RCDPE ERA AGING REPORT] if an exception exists for the ERA.



2.6.14. System Feature: Scratchpad Filter

2.6.14.1. Requirement: Change View Action

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen shall contain a new action, CV Change View, to filter the data displayed, based on the user's response to the Change View questions.

The Change View action is specific to a user.

2.6.14.2. Requirement: Order of Payments

The Change View action shall contain a question for Order of Payments instead of prompting the user each time the scratchpad is accessed:

ORDER OF PAYMENTS: NO ORDER//

2.6.14.3. Requirement: Unposted Lines or All Lines

The Change View action shall contain a question for display of unposted lines, posted lines or all lines:

DISPLAY (U)NPOSTED LINE, (P)OSTED LINES, OR (A)LL LINES: U//

2.6.14.4. Requirement: Zero Payments Order

The Change View action shall contain a question to order zero payments:

ORDER OF PAYMENTS: ZERO-PAYMENTS FIRST// ?

Enter the code corresponding to the sort order the user last used when accessing the worklist entry.

Choose from:

N	NO ORDER
F	ZERO-PAYMENTS FIRST
L	ZERO-PAYMENTS LAST

ORDER OF PAYMENTS: ZERO-PAYMENTS FIRST//

2.6.14.5. Requirement: Preferred View

The Change View action shall contain a required question to save as a preferred view and store the answers to the Change View questions if the user answers "Y":

DO YOU WANT TO SAVE THIS AS YOUR PREFERRED VIEW (Y/N)?:

2.6.14.6. Requirement: Preferred View Initialization

When a user selects an ERA from the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST], the system shall execute the Change View action if the user does not have a preferred view.

2.6.14.7. Requirement: Filter Displayed in Heading

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen shall display a line at the top of the heading to indicate the Change View display selected by the user:

View: No order, auto-posing, unposted lines, zero payments.

2.6.15. System Feature: Scratchpad

2.6.15.1. Requirement: Remove Batch Maintenance Action

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen shall no longer contain the action Batch Maintenance; however, the coding executed by the action shall remain on the system.

2.6.15.2. Requirement: Remove Research Menu Actions

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen for Research Menu shall no longer contain the actions Release Hold, On Hold List, and Claims Match Rpt; however, the coding executed by the actions shall remain on the system.

2.6.15.3. Requirement: Ignore Payment Retraction Pairs

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad shall ignore payment retraction pairs for claims when the following conditions are met, without regard to case sensitivity:

- Payment/Retraction pair is in the same ERA
- The first 5 characters of the patient's last name match
- The dates of service match
- The bill numbers or claim numbers match
- The social security numbers or patient IDs match

The amounts billed sum to zero, such as +5 and -5.

The payment/retraction pairs will be displayed in TPJI.

2.6.15.4. Requirement: Pharmacy Fees

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad shall automatically process fees at a line level.

2.6.15.5. Requirement: EEOB Screen Display

For pharmacy claims, The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen shall display ECME #, prescription number, fill number, release status, and date of service.



2.6.15.6. Requirement: Display Auto-Posted ERA

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen and Worklist Research screen shall display auto-posted ERAs with a receipt at the EEOB level and an Auto-Post Date at the ERA level that is only displayed when the ERA is completely posted.

2.6.15.7. Requirement: Unavailable Actions for Auto-Posted ERA

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen shall make the following actions unavailable for auto-posted ERAs:

- Split/Edit a Line
- Distribute Adj Amts
- Refresh Scratch Pad
- Verify

2.6.15.8. Requirement: Available Actions for Auto-Posted ERA

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen shall make the following actions available for auto-posted ERAs and will behave as non-auto posted ERAs that have receipts.

- Review Line
- EOB View/Print EEOB
- ERA View/Print ERA
- Exit

2.6.15.9. Requirement: Look at Receipt Action for Auto-Posted ERA

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] scratchpad ListManager screen shall make available the action to Look at Receipt, with the following behavior:

- Receipt number displays at the EEOB level

- The user must select the receipt to view and only one receipt is displayed at one time
- The action is not available for unposted EEOBs that are part of an auto-posted ERA

2.6.16. System Feature: Auto-Decrease for Medical Claim

2.6.16.1. Requirement: Decrease Adjustment

The system shall have a background job that automatically makes a decrease adjustment to the claim for the EEOB of a medical claim if the following criteria are met:

- Auto-posting of third party medical claims is enabled in the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS]
- The payer is not excluded from auto-posting of third party medical claims in the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS]
- Auto-decrease of third party medical claims is enabled in the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS]
- The payer is not excluded from auto-decrease of third party medical claims in the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS]
- The number of days since the EEOB was posted is equal to or greater than the number of days specified in the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS]
- The residual balance on the EEOB is equal to or less than the dollar amount maximum specified in the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS]
- The claim has not been referred to regional council or general council

2.6.16.2. Requirement: File for Medical Claim

The system shall file a contractual decrease adjustment for a medical claim and record the following:

- User - Postmaster
- Comment - Auto-Decrease Adjustment, Medical
- Date/Time Stamp
- Transaction Type – Decrease Adjustment

2.6.16.3. Requirement: Decrease Claim Amount

The system shall make a contractual decrease adjustment with an adjustment amount that brings the claim balance to zero.

2.6.16.4. Requirement: Auto-Decrease Report

The EDI LOCKBOX REPORTS MENU [RCDPE EDI LOCKBOX REPORTS MENU] shall contain a new option of AUTO-DECREASE ADJUSTMENT REPORT [RCDPE AUTO DECREASE REPORT] which shows automatic decrease adjustments that have been applied.

The user should be able to sort and/or select an Excel format.

```
Select EDI Lockbox Reports Menu Option: DC  Auto Decrease Adjustment Report
Select division: ALL//
SORT BY OR (C)LAIM #, (P)AYER or PATIENT (N)AME?: CLAIM//PATIENT NAME
SORT PATIENT NAME (F)IRST TO LAST OR (L)AST TO FIRST?: FIRST TO LAST//
START DATE: t  (NOV 27, 2013)
END DATE: NOV 27,2013// t  (NOV 27, 2013)
EXPORT THE REPORT TO Microsoft Excel (Y/N): ? NO//

DEVICE: HOME//   UCX/TELNET   Right Margin: 80//

                                     EDI LOCKBOX AUTO DECREASE ADJUSTMENT REPORT                               Page: 1
                                     RUN DATE: 11/27/13@18:47:14
                                     DIVISIONS: ALL
                                     DATE RANGE: 11/27/13 - 11/27/13 (Date Decrease Applied)

CLAIM #      PATIENT NAME      Payer      DECREASE AMT   DATE      CARC
=====
500-K111111  ARPATIENT, ONE      Payer One      1.00      11/27/13      23
500-K222222  ARPATIENT, TWO      Payer Two      1.77      11/27/13
500-K333333  ARPATIENT, THREE    Payer Three    2.00      11/27/13      100
500-K444444  ARPATIENT, FOUR     Payer Four     .50       11/27/13      100

**TOTALS FOR DATE: 11/27/13      # OF DECREASE ADJUSTMENT: 4
                                TOTAL AMOUNT OF DECREASE ADJUSTMENTS: $5.27

**** TOTALS FOR DATE RANGE:      # OF DECREASE ADJUSTMENT: 4
                                TOTAL AMOUNT OF DECREASE ADJUSTMENTS: $5.27

Enter RETURN to continue or '^' to exit:
```

2.6.17. System Feature: Auto-Posting Medical Claims

2.6.17.1. Requirement: Auto-Posting Claims

The system shall auto-post for medical claims when the following conditions are met:

- Auto-posting is enabled in the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS]
- The EEOB payer is not excluded from auto-posting in the EDI LOCKBOX PARAMETERS [RCDPE EDI LOCKBOX PARAMETERS]
- The Electronic Remittance Advice (ERA) does not have an exception
- The ERA does not contain interest
- The ERA does not contain an adjustment
- The Electronic Fund Transfer (EFT) and ERA are matched
- The EFT has been accepted by Financial Management System (FMS)

2.6.17.2. Requirement: Create and Process Receipt

The system shall create a receipt and process that receipt for medical claims when the following conditions are met:

- The ERA negative payments all have a matching positive payment (+/- pairs)
- The EEOB detail has been verified against bill detail
- The claim balance covers payment to be posted for all EEOBs
- The claim status is open for all EEOBs
- The claim has not been referred to regional council or general council

2.6.17.3. Requirement: Auto-Posting Awaiting Resolution

The system shall send an EEOB line to the Auto-Post Awaiting Resolution list when the conditions are met for auto-posting but at least one condition is not met to create and process a receipt.

Store the reason the EEOB line is sent to the Auto-Post Awaiting Resolution list.

2.6.18. System Feature: Auto-Posting

2.6.18.1. Requirement: Run Nightly

The auto-posting process shall run nightly and process receipts, including EEOBs that were previously on the Auto-Post Awaiting Resolution list but are now in a state that can be processed. Once processing completes, the receipts will continue to show up on reports as if a user processed the receipts.

2.6.18.2. Requirement: Receipt Creation

The system shall create a receipt for all EEOBs that can be auto-posted, even if all EEOBs in an ERA cannot be posted at the same time.

If all EEOBs in an ERA can be posted, the receipt number will contain “E” followed by numeric characters.

If only some of the EEOBs in an ERA can be posted, the receipt number will have an alphabetic character on the end, starting with “A” and proceeding in order until all EEOBs have been posted. The base number stays the same.

Example #1

ERA has 10 lines

Auto-Posting Day #1

All lines are posted and the receipt number is E1234.

Example #2

ERA has 10 lines

Auto-Posting Day #1

The first 3 lines are posted and the receipt number is E1234A.

Auto-Posting Day #2

The next 2 lines are posted and the receipt number is E1234B.

Auto-Posting Day #3

The remaining 5 lines are posted and the receipt number is E1234C.

2.6.18.3. Requirement: EEOB Worklist

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] shall display an "A" indicator before the ERA number if auto-posting is complete for that ERA.

#	ERA #	TRACE#	PAYER NAME/MATCH	STATUS	ERA PAID DT	TOT AMT PAID	DT REC'D
1	A4667	000032974			3/31/05	7.46	3/31/05
		THE COMMUNITY HOSPITAL			APPROX # EEOBs: 1		

2.6.18.4. Requirement: Ignore Payment Retraction Pairs

The system shall ignore payment retraction pairs for medical claims when the following conditions are met, without regard to case sensitivity:

- Payment/Retraction pair is in the same ERA
- The first 5 characters of the patient's last names match
- The dates of service match
- The bill numbers or claim numbers match
- The social security numbers or patient IDs match
- The amounts billed sum to zero, such as +5 and -5

2.6.18.5. Requirement: Status Change

The system shall make the following status changes when a medical claim is successfully auto-posted:

Claim Status - Collected/Closed

Receipt Status – Closed

Detail Post Status – Posted or Posted Incomplete

Detail Post Status becomes Posted when all lines have been posted. Detail Post Status becomes Posted Incomplete if some lines have been posted but not all.

2.6.18.6. Requirement: AR Display

The system shall display the auto-posted transactions within Accounts Receivable in the same manner as a manually posted transaction.

2.6.18.7. Requirement: FMS Data

The system shall continue to build data transactions to send to FMS using the same data format and structure that was used prior to the auto-post enhancements.

2.6.18.8. Requirement: Auto-Post Report

The EDI LOCKBOX REPORTS MENU [RCDPE EDI LOCKBOX REPORTS MENU] shall contain a new option of AUTO POST REPORT [RCDPE AUTO POST REPORT] to display information for auto-posted transactions.

2.6.19. System Feature: Match to ECME Claim

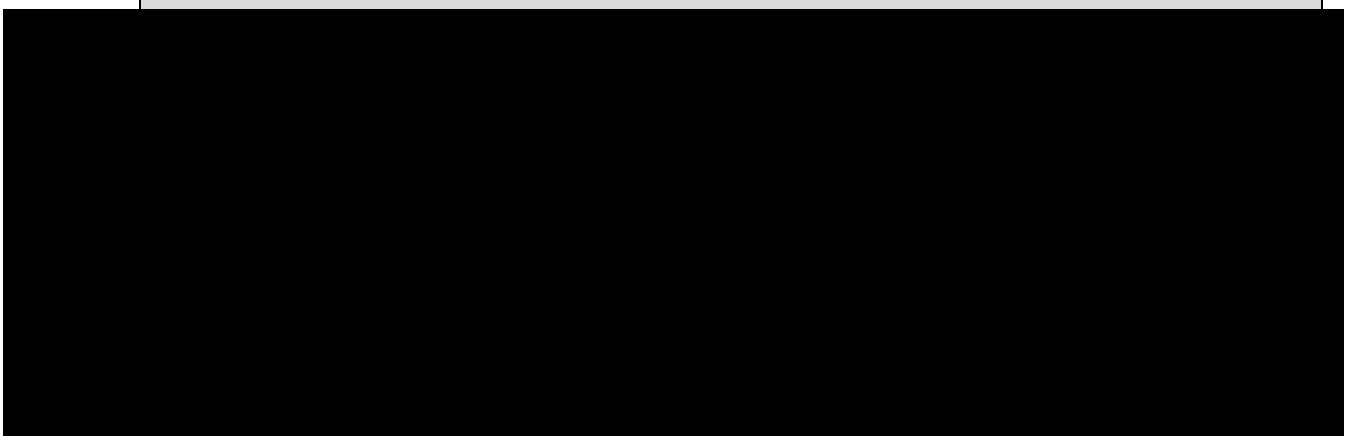
2.6.19.1. Requirement: Match to ECME Claim for Correct Fill

The system shall match the 835 to the correct ECME claim for the correct pharmacy fill.

2.6.20. System Feature: Auto-Post Awaiting Resolution

2.6.20.1. Requirement: Screen Display

The AUTO-POST AWAITING RESOLUTION [RCDPE AUTO-POST AWAITING RESOLUTION] option shall display EEOB line items from one to many ERAs in a ListManager format, removing an EEOB line item after a receipt has been created and processed or marked for auto-post.



2.6.20.2. Requirement: Actions

The following actions shall be available from the ListManager screen and shall behave like actions on the existing worklist:

- Select EEOB
- View/Print ERA
- CV Change View
- Exit

2.6.20.3. Requirement: All Payers or Range

The AUTO-POST AWAITING RESOLUTION [RCDPE AUTO-POST AWAITING RESOLUTION] option shall display a question to select payers before showing the ListManager screen:

(A)LL PAYERS, (R)ANGE OF PAYER NAMES: ALL//

2.6.21. System Feature: Auto-Post Awaiting Resolution EEOB

2.6.21.1. Requirement: EEOB Screen Display

The system shall display the EEOB detail when a user selects the Select EEOB action.

Only the unposted lines should display.

The user should return to the Auto-Post Awaiting Resolution screen after exiting the EEOB display.

AWAITING RESOLUTION – Selected EEOB - Scratch Pad				Nov 19, 2013@21:37:21		Page: 1 of 2	
<div style="background-color: black; height: 30px; width: 100%;"></div>							
POSTED RECEIPT #(s): E123838							
EEOB Seq # On ERA: 7 Net Payment Amt: 69.17							
6.001 Claim #: K307YUC Patient/Last 4: TEST, PATIENT ONE/7017							
Claim Bal: 69.17 Billed Amt: 69.17 Amt To Post: 69.17							
Svc Dt: 1/4/13 COB: NO Rx Copay: NON-EXEMPT Means Tst: YES							
Payment Amt: 69.17 Total Adjustments: 0.00 Net: 69.17							
APAR Reason: Not Verified							
+ Enter ?? for more actions							
Split/Edit A Line		Look At Receipt		EOB View/Print EEOB			
Mark for Auto-Post		Review Line		ERA View/Print ERA			
Refresh Scratch Pad		Exit					
Research Menu		Verify					
Select Action: QUIT//							

2.6.21.2. Requirement: EEOB Screen Actions

The following actions shall be available from the ListManager screen and shall behave like actions on the existing workload:

- Split/Edit A Line
- Mark for Auto-Post
- Refresh Scratch Pad
- Research Menu
- Look At Receipt
- Review Line
- Verify
- EOB View/Print EEOB
- ERA View/Print ERA
- Exit

2.6.21.3. Requirement: Mark for Auto-Post

The ListManager screen shall contain a new action of Mark for Auto-Post that will check the EEOB for auto-posting criteria and mark the EEOB for auto-posting if all criteria are met.

The EEOB should be removed from the Awaiting Resolution list once it is successfully marked for auto-posting.

If the EEOB cannot be successfully marked for auto-posting, display the reason the EEOB cannot be auto-posted.

Verification is a requirement before marking for auto-post.

+ Enter ?? for more actions			
Split/Edit A Line	Look At Receipt	EOB View/Print	EEOB
Mark for Auto-Post	Review Line	ERA View/Print	ERA
Refresh Scratch Pad	Exit		
Research Menu	Verify		
Select Action: QUIT// Mark for Auto-Post			
87705.7 has been marked for auto-post and has been removed from the Awaiting Resolution List.			

2.6.22. System Feature: Auto-Post Awaiting Resolution View/Print ERA

2.6.22.1. Requirement: Add Auto-Post Status

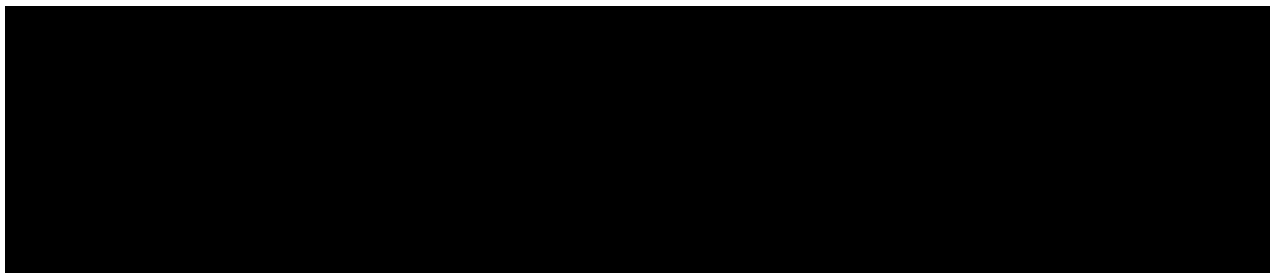
The View/Print ERA action shall display an Auto-Post Status of Completed or Not Completed, at the ERA summary level.

2.6.22.2. Requirement: Detail Post Status

The system shall contain a new value of POSTING INCOMPLETE for the Detail Post Status and change the label to “ERA DETAIL POST STATUS”.

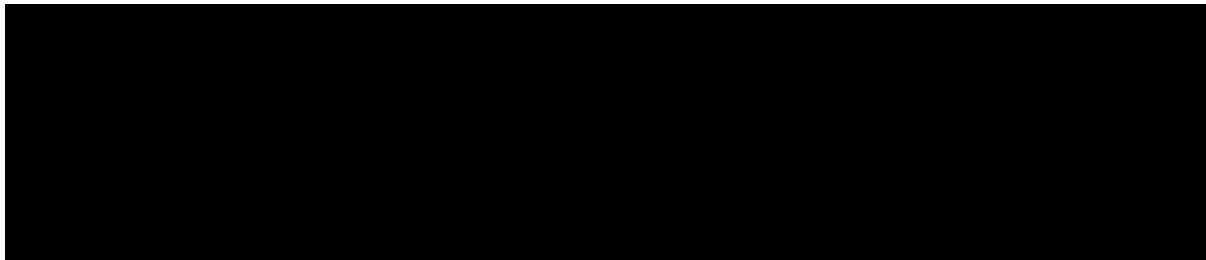
2.6.22.3. Requirement: Add Auto-Post Date

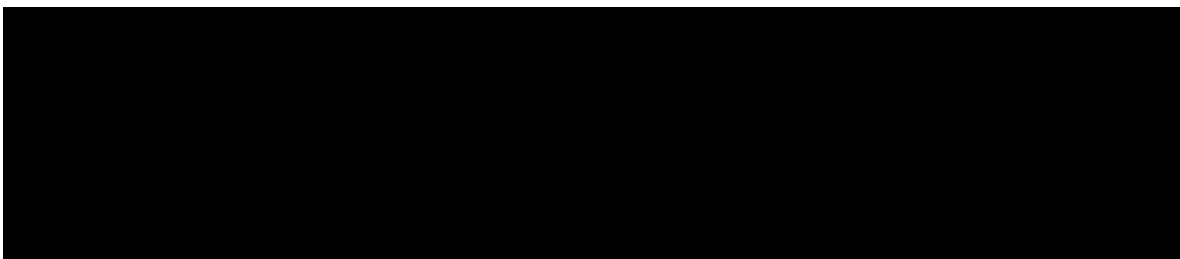
The View/Print ERA action shall display an Auto-Post Date for a status of completed, at the ERA summary level.



2.6.22.4. Requirement: Receipt

The View/Print ERA action shall display the Receipt at the EEOB detail level, regardless of posting.





2.6.23. System Feature: Auto-Post Awaiting Resolution Filter

2.6.23.1. Requirement: Change View Action

The AUTO-POST AWAITING RESOLUTION [RCDPE AUTO-POST AWAITING RESOLUTION] ListManager screen shall contain a new action, CV Change View, to filter the data displayed, based on the user's response to the Change View questions.

The Change View action is specific to a user.

2.6.23.2. Requirement: All Payers or Range

The Change View action shall contain a question to select payers:

(A)LL PAYERS, (R)ANGE OF PAYER NAMES: ALL//

2.6.23.3. Requirement: Preferred View

The Change View action shall contain a required question to save as a preferred view and store the answers to the Change View questions if the user answers "Y":

DO YOU WANT TO SAVE THIS AS YOUR PREFERRED VIEW (Y/N)?:

2.6.23.4. Requirement: Preferred View Initialization

When a user selects the EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] option, the system shall execute the Change View action if the user does not have a preferred view.

2.6.23.5. Requirement: Filter Displayed in Heading

The EEOB WORKLIST [RCDPE EDI LOCKBOX WORKLIST] ListManager screen shall display a line at the top of the heading to indicate the Change View display selected by the user:

Filter: ALL PAYERS

2.6.24. System Feature: Receipt Processing

2.6.24.1. Requirement: Identify First and Third Party

The RECEIPT PROCESSING [RCDP RECEIPT PROCESSING] option shall identify first party receipts with an indicator of "P" and third party receipts with an indicator of "H".

Per a meeting with the CBO on 1/28/2014, this requirement is no longer needed. The requirement will remain in the RSD to preserve the numbering.

2.6.24.2. Requirement: Change Type of Payment

The RECEIPT PROCESSING [RCDP RECEIPT PROCESSING] action ER Edit Receipt shall allow the user to change the Type of Payment field and prompt "Are you sure", if the following conditions are met:

- Receipt status is open
- Current value is EDI LOCKBOX
- New value is CHECK/MO PAYMENT

2.6.24.3. Requirement: Unmatch the EFT

When a user successfully changes the Type of Payment from EDI LOCKBOX to CHECK/MO PAYMENT, the system shall mark the EFT as unmatched.

2.6.25. System Feature: Exception Bulletins

2.6.25.1. Requirement: Remove Bulletins

The system shall no longer send exception bulletins for the following:

- EDI LBOX EEOB - EXCEPTIONS
- EDI LBOX - NO VALID BILLS ON ERA
- EDI LBOX - ERA HAS ADJ/TAKEBACKS
- EDI LBOX ERA - DUPLICATE TRANSMISSION MSG
- EDI LBOX-STA# 999-Move/Copy Transactions

2.6.26. System Feature: TPJI Reports

2.6.26.1. Requirement: Add Indicator for Rejects

The system shall display "x" to indicate a reject on the following reports:

- Full Account Profile
- List All Bills
- Bill Profile
- Claims Matching Report
- Insurance Payment Trend Report
- TPJI Bill Charges Screen
- TPJI Active/Inactive Bills Screens
- Third Party Follow-Up Report

For the purpose of this requirement, a reject is defined to be a billing reject that is on the Claim Status Awaiting Resolution (CSA) or Medicare Remittance Advice Worklist (MRW) report.

2.6.26.2. Requirement: Add Auto-Post Status

The TPJI Bill Charges Screen shall display a new field to show the Auto-Post Status after the ERA field, only if the ERA is an auto-post candidate.

2.6.27. System Feature: Daily Activity Report

2.6.27.1. Requirement: Change the Name

The EDI LOCKBOX REPORTS MENU [RCDPE EDI LOCKBOX REPORTS MENU] option DAILY ACTIVITY REPORT [RCDPE EDI LOCKBOX ACT REPORT] shall be renamed to EFT DAILY ACTIVITY REPORT [RCDPE EDI LOCKBOX ACT REPORT].

2.6.28. System Feature: Miscellaneous Reports

2.6.28.1. Requirement: Add a Date Range

The ACTIVE BILLS WITH EEOB REPORTS [RCDPE ACTIVE WITH EEOB REPORT] shall prompt the user for a beginning and ending Received Date, used to limit the report output.

2.6.28.2. Requirement: Change to ListManager

The following reports shall be displayed in a ListManager format with standard ListManager actions available for selection:

- ACTIVE BILLS WITH EEOB REPORTS [RCDPE ACTIVE WITH EEOB REPORT]
- DAILY ACTIVITY REPORT [RCDPE EDI LOCKBOX ACT REPORT]
- ERA UNMATCHED AGING REPORT [RCDPE ERA AGING REPORT]
- EFT UNMATCHED AGING REPORT [RCDPE EFT AGING REPORT]
- UNAPPLIED EFT DEPOSITS REPORT [RCDPE UNAPPLIED EFT DEP REPORT]
- DUPLICATE EFT DEPOSITS AUDIT REPORT [RCDPE EFT AUDIT REPORT]
- EEOB MOVE/COPY AUDIT REPORT [RCDPE EEOB MOVE/COPY REPORT]
- ERAS POSTED WITH PAPER EOB AUDIT [RCDPE ERA W/PAPER EOB REPORT]
- REMOVE ERA FROM ACTIVE WORKLIST [RCDPE REMOVED ERA AUDIT]

2.6.28.3. Requirement: Add Filter for TRICARE and CHAMPVA

The following reports shall have filter questions to allow inclusion or exclusion of TRICARE and CHAMPVA:

- ACTIVE BILLS WITH EEOB REPORTS [RCDPE ACTIVE WITH EEOB REPORT]
- DAILY ACTIVITY REPORT [RCDPE EDI LOCKBOX ACT REPORT]
- ERA UNMATCHED AGING REPORT [RCDPE ERA AGING REPORT]

- EEOB MOVE/COPY AUDIT REPORT [RCDPE EEOB MOVE/COPY REPORT]
- ERAS POSTED WITH PAPER EOB AUDIT [RCDPE ERA W/PAPER EOB REPORT]
- REMOVE ERA FROM ACTIVE WORKLIST [RCDPE REMOVED ERA AUDIT]

The filter selection for TRICARE and CHAMPVA will be displayed in the report headers, consistent with the current filter selection display.

2.6.29. System Feature: EEOB Move/Copy Option

2.6.29.1. Requirement: Correct Payer Information

The system shall transfer the correct payer information when moving or copying an EEOB from one patient to another.

2.6.29.2. Requirement: Rename the Option

The EEOB Move/Copy option shall be renamed to the EEOB Move/Copy/Remove option and prompt the user with an option to Remove EEOB from patient claim.

EXC	EDI Lockbox 3rd Party Exceptions
MA	Automatic Match EFTs to ERAs
MCR	EEOB Move/Copy/ Remove
MM	Manual Match EFT-ERA
MO	Move ERA Total To Suspense
REFT	Remove Duplicate EFT Deposits
REP	EDI Lockbox Reports Menu ...
RET	Mark ERA Returned To Payer
UN	Unmatch An ERA
UP	Update ERA Posted Using Paper EOB
WL	EEOB Worklist
ZB	Mark 0-Balance EFT Matched

Select EDI Lockbox Option: MCR EEOB Move/Copy/**Remove**

Select one of the following:

M	Move EEOB to different claim
C	Copy EEOB to multiple claims
R	Remove EEOB from patient claim

Select action: **R**/remove EEOB from patient claim

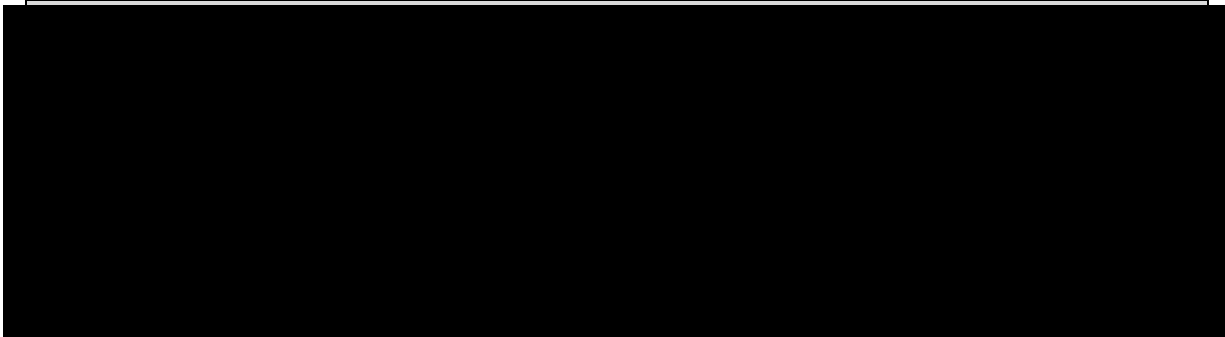
2.6.29.3. Requirement: Require Security Key

The Remove option on the new EEOB Move/Copy/Remove option shall require new security key RCDPE REMOVE EEOB.

2.6.29.4. Requirement: Remove Option

The Remove option on the new EEOB Move/Copy/Remove option shall display the patient and claim information for verification, require the user to enter a free text justification comment, and

prompt the user with a question of "Are you sure you want to remove EEOB from claim K#### (Y/N)?".



2.6.29.5. Requirement: Audit Log

The Remove option on the new EEOB Move/Copy/Remove option shall store data in the audit log with the following information:

- Audit Log type of "R"
- Date/Time stamp
- User
- Original Bill Number
- Free Text Justification Comment

2.6.29.6. Requirement: Reports

After the remove option has been executed, the system shall no longer display the removed EEOB information for the patient with whom the information was previously associated.

2.6.29.7. Requirement: AR Comment

The system shall display a comment on the Bill Charges screen, similar to the comment that is displayed for Move/Copy.

Bill Charges		Nov 15, 2013@18:33:04	Page: 3 of 9
%K700001	ARPATIENT,ONE	07774	DOB: 01/23/36 Subsc ID: 657789
06/13/97 - 06/13/97	ADMIT THRU DISCHARGE		Orig Amt: 50.00
+			
EOB Type: NORMAL EOB			
ICN:		Patient Resp Amount: 0.00	
Payer Name: INSURANCE LTD.		Total Allowed Amount: 0.00	
EOB Date:		Total Submitted Charges: 0.00	
Svc From Dt:		Svc To Dt:	
		Reported Payment Amt: 0.00	
ERA #: 1007			
Trace #: 8281206DA5			
MOVE/COPY/REMOVE HISTORY			
Date/Time EEOB Removed: NOV 15, 2013@17:53:47			
Remove of EEOB performed by: USER,AR			
Remove Justification Comments:			
testing comment testing comment			
Original Claim Number: 92046A			

+ % EEOB Enter ?? for more actions		
PR Bill Procedures	CM Comment History	AB Annual Benefits
CI Go to Claim Screen	IR Insurance Reviews	EL Patient Eligibility
	HS Health Summary	EX Exit
ED EDI Status	AL Go to Active List	
	VI Insurance Company	
Select Action: Next Screen//		

2.6.29.8. Requirement: AR Comment History

The system shall display a comment in AR Comment History, similar to the comment that is displayed for Move/Copy.

Comment History		Nov 15, 2013@18:36:46	Page: 2 of 2
%K700001	ARPATIENT,ONE	07774	DOB: 01/23/36 Subsc ID: 657789
AR Status: RETURNED FOR AMENDMENT		Orig Amt: 50.00	Balance Due: 50.00
+			
4949	11/15/13	EEOB REMOVED BY XXX testing comment testing comment	FOLLOW-UP DT:
4950	11/15/13	ERA Payer Contact Information Payer Name: INSURANCE LTD. Contact Name: FIRSTNM LASTNM Phone Number: 2006649555	FOLLOW-UP DT:
% EEOB Enter ?? for more actions			
BC Bill Charges	AR Account Profile	VI Insurance Company	
DX Bill Diagnosis	AD Add Comment	VP Policy	
PR Bill Procedures	IR Insurance Reviews	AB Annual Benefits	
CI Go to Claim Screen	HS Health Summary	EL Patient Eligibility	
	AL Go to Active List	EX Exit	
Select Action: Quit//			

2.6.29.9. Requirement: Add Filter Question

For report MCR EEOB Move/Copy/Remove, the system shall display a filter question of MOVE/COPY/REMOVE or ALL.

The user selection will display in the header, consistent with other filter question responses.

START DATE: T-2 (DEC 31, 2013)
END DATE: DEC 31,2013// T (JAN 02, 2014)
Select division: ALL//
MOVE/COPY/REMOVE or ALL (M/C/R/A): ALL//
Are you sure you want to select ALL divisions ? NO// YES
Export the report to Microsoft Excel? NO//

2.6.30. System Feature: Add Security Keys

2.6.30.1. Requirement: Add Security Keys

The system shall contain the following new security keys, none of which shall be automatically assigned to any user:

- RCDPE AGED PMT
- RCDPE ERA EXCEPT
- RCDPE AUTO DEC

- RCDPE REMOVE EEOB

2.6.31. System Feature: Testing Tool

2.6.31.1. Requirement: Reset 837

The system shall have the ability to reset an 837 to allow an 835 to reprocess against that 837.

2.6.31.2. Requirement: Reset ECME Bill

The system shall have the ability to reset an ECME bill to allow an 835 to reprocess against the bill.

2.6.31.3. Requirement: Manipulate Fields and Resend

The system shall have the ability to reprocess the ERA in VistA after manipulating the 5 fields on the ERA used for matching: the first 5 characters of the patient's last name, date of service, bill number or claim number, social security number or patient ID, and the amount paid.

2.6.31.4. Requirement: Process De-identified data

The system shall have the ability to receive and process de-identified data.

2.6.31.5. Requirement: Not Available after National Release

The testing functionality shall not be available to sites after national release.

2.6.32. System Feature: Non- Released Prescriptions

2.6.32.1. Requirement: EXC Exception List

The system shall place an EEOB on the EXC Exception List if the EEOB pertains to a prescription that is non-released.

2.6.32.2. Requirement: Process Released Prescriptions

The system shall run a nightly job removing exceptions from the EXC Exception List if the exception was triggered for non-released prescription which is newly released.

Once the EEOB is removed from the EXC Exception List, process will continue as normal.

2.6.33. System Feature: Trace Number with 9s

2.6.33.1. Requirement: Include EFTs

The system shall include EFTs with trace number that is all 9's and include all payer names on the bulletin with a subject of "EDI LBOX-STA# NNN-ACTION REQ-EFTS>14 days" and the following reports:

- Daily Activity Report
- EFT Unmatched Aging
- Unapplied EFT Deposits

If the payer name is null, show the entry on the report with a name of <NO PAYER NAME RECEIVED>.

2.6.34. System Feature: Active Bills with EEOB Report

2.6.34.1. Requirement: EEOB Date Posted

The system shall reference the EEOB date posted instead of the ERA date posted on report ACTIVE BILLS WITH EEOB REPORT [RCDPE ACTIVE WITH EEOB REPORT].

2.6.35. System Feature: Manual Match of ERA and EFT

2.6.35.1. Requirement: Add Date Range

The system shall prompt the user for a date range and filter the data based on the date range for the option MANUAL MATCH EFT-ERA [RCDPE MANUAL MATCH EFT-ERA].

2.6.35.2. Requirement: Partial Match on Trace Number

The system shall allow a partial match on trace number, ignoring leading zeroes.

2.6.36. System Feature: Decrease Adjustment

2.6.36.1. Requirement: Warning Message if Mark for Auto-Post

The option DECREASE ADJUSTMENT [PRCAC TR DECREASE] shall display a warning message of “Marked for Auto-Post. Are you sure? (Y/N): N/” if a user tries to make a decrease adjustment on a bill that has at least one associated EEOB marked for auto-post.

2.7. Graphical User Interface (GUI) Specifications

The enhancements described in this document do not contain any specification for functionality that uses a GUI front end.

2.8. Multi-divisional Specifications

The enhancements described in this document will preserve the multi-divisional functionality that currently exists.

2.9. Performance Specifications

The enhancements described in this document will affect the interface between FSC and VistA because sites will have the ability to turn on pharmacy claims which will increase the volume of incoming messages. Also, the volume of outgoing messages to FMS will increase.

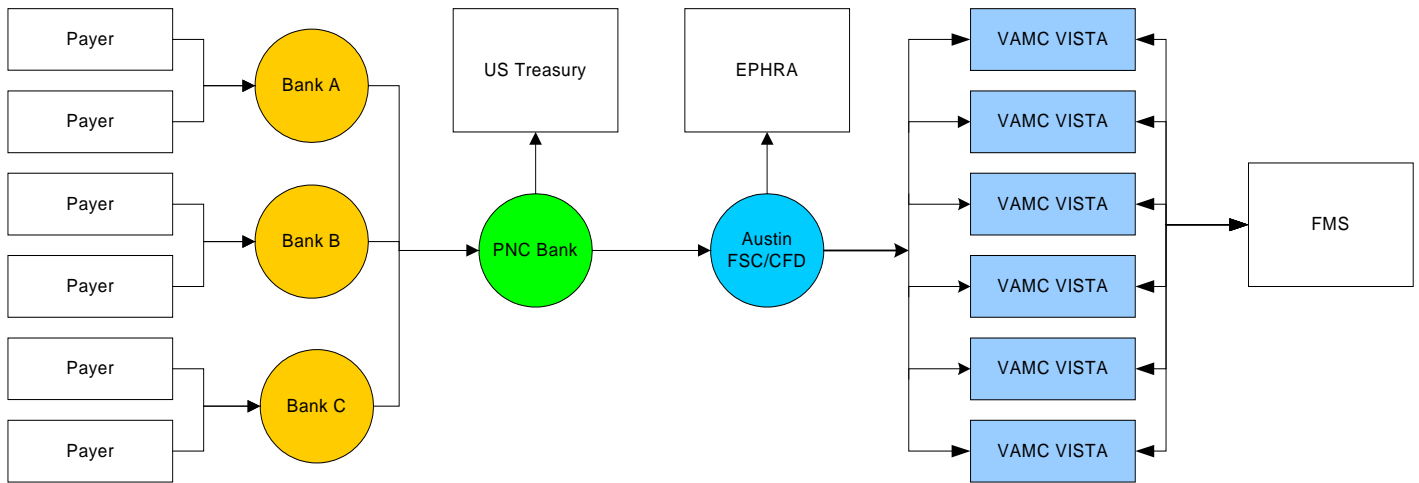
2.10. Quality Attributes Specification

The project team will adhere to the standards set forth in The Department of Veterans Affairs M Programming Standards and Conventions.

2.11. Reliability Specifications

The enhancements described in this document should have negligible effect on reliability.

2.12. Scope Integration



The ePayments system currently integrates and will continue to integrate with the following external components.

- FSC
- FMS

2.13. Security Specifications

The project team will adhere to all applicable VA and VHA security requirements.

2.14. System Features

Refer to the section on Functional Specifications for system feature information.

2.15. Usability Specifications

The enhancements described in this document should have minimal effect on usability, such as the time required for a normal user to learn the system and become productive. Training will be required for both normal and super-users to become productive with the enhancements in these patches; however the training required should not fall outside of the normal training required for an enhancement of this size.

3. Applicable Standards

The following standards are listed in the section of References, which contains additional information for each:

- HIPAA (Health Insurance Portability and Accountability Act of 1996)
- PPACA (Patient Protection and Affordable Care Act of 2010)--"Health Care Reform" House of Representatives (H.R.) 3590, Section 1104--Administrative Simplification, Section 10109--Development of Standards for Financial and Administrative Transactions
- The Department of Veterans Affairs M Programming Standards and Conventions

4. Interfaces

It will not be necessary to develop or modify interfaces to satisfy the enhancements described in this document.

4.1.Communications Interfaces

The Accounts Receivable ePayments module receives 835 Health Care Claims transmissions from the VA's Financial Services Center in Austin, TX using VistA's Mailman software. This existing communication interface will not be affected by the enhancements described in this document.

4.2.Hardware Interfaces

Existing hardware interfaces will not be affected by the enhancements described in this document.

4.3.Software Interfaces

Existing software interfaces will not be affected by the enhancements described in this document. Refer to the section of Scope of Integration for identification of software interfaces.

4.4.User Interfaces

Existing user interfaces will not be affected by the enhancements described in this document.

5. Legal, Copyright, and Other Notices

This section is not applicable. The enhancements described in this document do not require notices such as legal disclaimers and copyright notices.

6. Purchased Components

The enhancements described in this document do not require purchased components.

7. User Class Characteristics

Name	Description	Responsibilities
Primary Users	Accounts Receivable Staff	Payer analysis and resolution of received 835 transactions.
Primary Users	Accounts Receivable Managers	Manage resources and finances.
Primary Users	Cash Management Staff	Process ePayment worklists to post cash in FMS.
Primary Users	Cash Management Managers	Manage resources and finances.
Primary Users	CPAC CFO	Communicate and support business users in the new electronic process.
Primary Users	Financial Services Center (FSC, formerly AAC)	Provide technical support at the clearinghouse for systems integration between VistA and FMS.
Secondary Users	Medical Center CFOs	Monitor financial impacts.
Secondary Users	IRM EPS	Resolve issues and support end user community.
Secondary Users	CBO Leadership VISN Leadership VAMC Directors and CFO	Define, communicate and enforce new business procedures. Encourage staff adoption of new technologies.
Secondary Users	VISN Business Implementation Managers (BIM)	Assist with the execution of system requirements, design and deployment.
Secondary Users	Facility Revenue Managers	Liaison between CPAC revenue staff and facility revenue staff and management
Secondary Users	MCCF Coordinators	Communicate and support business users in the new electronic process.

8. Estimation

The following placeholders for the Function Point Analysis Results Table will be replaced with actual functional point analysis data when that data becomes available.

Project Software Functional Size and Size-Based Effort and Duration Estimate Application

Item	A	B	C	D	E	Total
Counted Function Points						
Estimated Scope Growth						
Estimated Size at Release						

Size-Based Effort Estimates	Labor Hours	Probability
Low-Effort Estimate – With indicated probability, project will consume no more than:		
High-Effort Estimate – With indicated probability, project will consume no more than:		

Size-Based Duration Estimates	Work Days	Probability
Low-Duration Estimate – With indicated probability, project will consume no more than:		
High-Duration Estimate -- With indicated probability, project will consume no more than:		

Figure 1: Cumulative Probability (“S-curve”) Chart

[Insert Cumulative Probability (“S-curve”) Charts here]

9. Approval Signatures

This section is used to document the approval of the RSD during the Formal Review. The review should be ideally conducted face to face where signatures can be obtained ‘live’ during the review, however the following forms of approval are acceptable:

- Physical signatures obtained face to face or via fax
- Physical signature obtained in person or via fax
- Digital signature tied cryptographically to the signer
- /es/ in the signature block, provided that a separate digitally signed e-mail indicating the signer’s approval is provided and kept with the document

The Chair of the governing Integrated Project Team (IPT), Business Sponsor, IT Program Manager, and the Project Manager are required to sign.

REVIEW DATE: <date>

SCRIBE: <name>

Signed:

Integrated Project Team (IPT) Chair

Date

Business Sponsor

Date

IT Program Manager

Date

Project Manager

Date

Template Revision History

Date	Version	Description	Author
March 2013	1.1	Formatted to current ProPath documentation standards and edited to conform with latest Alternative Text (Section 508) guidelines	Process Management
January 2013	1.0	Initial Version	PMAS Business Office