**TAS eBill SDD US2599**

System Design Document

IB\*2.0\*608



Department of Veterans Affairs

**March 2018**

Version 2.0

**User Story Number:** US-2599

**User Story Name:** non-MCCF Pay-to Address\_Rate Types

**Product Backlog ID:** n/a

**Rally ID:** US-2599

|  |  |
| --- | --- |
| **Epic Taxonomy** | eBiz Compliance  Port  Update  Increase No Touch  TAS Apps |

# Design/Resolution

Overall Design Components:

1. Data Dictionary Files:
   1. Site Parameters’ TRICARE Pay-To Providers sub-file – #350.929 (modified)
   2. Site Parameters’ Non-MCCF Rate Types for PTP sub-file - #350.928 (new)
2. Routines:
   1. IBJPS2 (modified)
   2. IBJPS3 (modified)
   3. IBJPS4 (modified)
   4. IBJPS7 (new)
3. List Templates:
   1. IBJP IB TRICARE PAY-TO PROVS (modified)
   2. IBJP IB NON-MCCF RATE TYPES (new)
4. Protocols:
   1. IBJP IB TRICARE PAY-TO PROVIDERS MENU (delete)
   2. IBJP IB NON-MCCF RATE TYPE ADD (new)
   3. IBJP IB NON-MCCF RATE TYPE DEL (new)
   4. IBJP IB NON-MCCF RATE TYPES (new)
   5. IBJP IB NON-MCCF RATE TYPES MENU (new)
   6. IBJP IB NON-MCCF PAY-TO PROVIDERS MENU (new)

\*NOTE – Names of the protocols and/or worklists are not being changed. They are internally viewable only. Changing those names would require either an integration agreement with the protocol file to change them or removing them all and sending new ones in their place. The gains would not be worth the extra work or risk. In addition, the protocol “IBJP IB TRICARE PAY-TO PROVIDERS MENU” is being deleted because it is being replaced by “IBJP IB NON-MCCF PAY-TO PROVIDERS MENU”.

\*NOTE-Changing all displayed names for prompts, etc. are being changed from TRICARE to Non-MCCF.

\*NOTE-The code to compare for the exact same address is already in place (DIFF^IBJPS3) and does not require changes. The only code change required to this existing code is the TRICARE^IBJPS4 module of code which determines whether the Bill/Claim has one of the Non-MCCF Rate Types.

**Detailed Design:**

1. DATA DICTIONARY FILES:
   * Site Parameters’ TRICARE Pay-To Providers sub-file – #350.929 (modifications)

| **Data Dictionary** | **Activities** |
| --- | --- |
| **FileName & Number** | Site Parameters’ TRICARE Pay-To Providers sub-file (#350.929) |
| **Current Data Definitions** | |
| STANDARD DATA DICTIONARY #350.929 -- TRICARE PAY-TO PROVIDERS SUB-FILE 2/21/18 PAGE 1  STORED IN ^IBE(350.9,D0,29, SITE: PII UCI: VISTA,ROU  DATA NAME GLOBAL DATA  ELEMENT TITLE LOCATION TYPE  -------------------------------------------------------------------------------  This multiple contains the list of TRICARE-specific Pay-To Providers for this  VistA database.  CROSS  REFERENCED BY: TC FACILITY(B)  INDEXED BY: TC FACILITY (AC)  350.929,.01 TC FACILITY 0;1 POINTER TO INSTITUTION FILE (#4)  INPUT TRANSFORM: S DIC("S")="I $$SCRN4^IBJPS4(Y)" D ^DIC K DIC S  DIC=DIE,X=+Y K:Y<0 X  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Please choose the TRICARE-specific Pay-To  Provider from the Institution file.  DESCRIPTION: Enter a TRICARE-specific Pay-to Provider.  Usually, a Pay-to Provider is a medical center  (e.g. VAMC, M&ROC, etc.). If you enter only  one TRICARE-specific Pay-to Provider, it will  be the default Pay-to Provider for all TRICARE  claims and you would not need to associate  divisions with the default. Multiple TRICARE-  specific Pay-to Providers must be associated  with the divisions to which they apply.  SCREEN: S DIC("S")="I $$SCRN4^IBJPS4(Y)"  EXPLANATION: Inactive, not national, and pharmacy entries ar  e screened out.  CROSS-REFERENCE: 350.929^B  1)= S ^IBE(350.9,DA(1),29,"B",$E(X,1,30),DA)=""  2)= K ^IBE(350.9,DA(1),29,"B",$E(X,1,30),DA)  FIELD INDEX: AC (#871) MUMPS IR ACTION  Short Descr: Name and address defaults  Description: The purpose of this x-ref is to default the  name and address fields in this sub-file from  data found in the Institution file. The idea  is that the user will select a VA Institution  from file 4 to be one of the TRICARE-specific  Pay-To Providers in this sub-file. The name  and address of the VA Institution will be used  as defaults for the name and address fields  here in this sub-file. The default name and  address information may be overridden.  Set Logic: I $G(X1(1))'=$G(X2(1)) D DEF^IBJPS3(+$G(X2(1)),  .DA,1)  Kill Logic: Q  X(1): TC FACILITY (350.929,.01) (forwards)  350.929,.02 TC NAME 0;2 FREE TEXT (Required)  TRICARE Pay-to Provider Name  INPUT TRANSFORM: K:$L(X)>35!($L(X)<1) X  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Answer must be 1-35 characters in length.  DESCRIPTION: You may modify the TRICARE-specific Pay-to  Provider name for use on electronic or printed  claims.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,.03 TC FEDERAL TAX NUMBER 0;3 FREE TEXT  TRICARE Pay-to Provider Federal Tax ID Number  INPUT TRANSFORM: K:$L(X)>10!($L(X)<10)!'(X?2N1"-"7N) X  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Answer must be 10 characters in the format  NN-NNNNNNN.  DESCRIPTION: Enter the Federal Tax ID for the  TRICARE-specific Pay-to Provider. Make sure  you enter the Tax ID Number for the TRICARE  Pay-to Provider, which may be different from  your site's Tax ID. Enter 10 characters in the  format NN-NNNNNNN.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field if the .01 field is the same  institution as defined in the IB site  parameters field 350.9, .02.  350.929,.04 TC TELEPHONE NUMBER 0;4 FREE TEXT  TRICARE Pay-to Provider Phone Number  INPUT TRANSFORM: K:$L(X)>30!($L(X)<1) X  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Answer must be 1-30 characters in length.  DESCRIPTION: Enter the phone number to be used on electronic  or printed claims. This is the number you  would want a payer to use to contact the site  about a TRICARE claim.  350.929,.05 TC PARENT PAY-TO PROVIDER 0;5 NUMBER  INPUT TRANSFORM: K:+X'=X!(X>9999)!(X<1)!(X?.E1"."1N.N) X  LAST EDITED: MAY 08, 2014  HELP-PROMPT: Type a number between 1 and 9999, 0 decimal  digits.  DESCRIPTION: This field determines if this entry in the  sub-file is a TRICARE Pay-to Provider  institution or if it is a Division being linked  to the parent TRICARE Pay-to Provider  institution, that is, another sub-file entry.    If this field is defined, then it holds the IEN  in this sub-file of the parent TRICARE Pay-to  Provider institution for this specific  division.    If this field is nil, then this sub-file entry  is the parent TRICARE Pay-to Provider  institution.    This field should not be set via FileMan. The  application in the IB Site Paremeter edit  option will set this field appropriately based  on user input.  350.929,1.01 TC STREET ADDRESS 1 1;1 FREE TEXT  TRICARE Pay-to Provider Address Line 1  INPUT TRANSFORM: K:$L(X)>55!($L(X)<1) X  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Answer must be 1-55 characters in length.  DESCRIPTION: You may modify the TRICARE-specific Pay-To  Provider Address for use on electronic or  printed claims. You may enter a P.O. Box.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,1.02 TC STREET ADDRESS 2 1;2 FREE TEXT  TRICARE Pay-to Provider Address Line 2  INPUT TRANSFORM: K:$L(X)>55!($L(X)<1) X  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Answer must be 1-55 characters in length.  DESCRIPTION: Enter additional address information, if  needed.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,1.03 TC CITY 1;3 FREE TEXT  TRICARE Pay-to Provider City  INPUT TRANSFORM: K:$L(X)>40!($L(X)<2) X  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Answer must be 2-40 characters in length.  DESCRIPTION: You may modify the TRICARE Pay-to Provider  address for use on electronic or printed  claims.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,1.04 TC STATE 1;4 POINTER TO STATE FILE (#5)  TRICARE Pay-to Provider State  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Answer with State Number, or Name, or  Abbreviation.  DESCRIPTION: You may modify the TRICARE Pay-to Provider  address for use on electronic or printed  claims.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,1.05 TC ZIP 1;5 FREE TEXT  TRICARE Pay-to Provider Zip Code  INPUT TRANSFORM: K:$L(X)>15!($L(X)<3) X  LAST EDITED: JUL 09, 2014  HELP-PROMPT: Answer must be 3-15 characters in length.  DESCRIPTION: You may modify the TRICARE Pay-to Provider  address for use on electronic or printed  claims.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  FILES POINTED TO FIELDS  INSTITUTION (#4) TC FACILITY (#.01)  STATE (#5) TC STATE (#1.04)  INPUT TEMPLATE(S):  PRINT TEMPLATE(S):  SORT TEMPLATE(S):  FORM(S)/BLOCK(S): | |
| **Modified Logic (Changes are in bold)** | |
| STANDARD DATA DICTIONARY #350.929 -- TRICARE PAY-TO PROVIDERS SUB-FILE 2/22/18 PAGE 1  STORED IN ^IBE(350.9,D0,29, SITE: PII UCI: VISTA,ROU  DATA NAME GLOBAL DATA  ELEMENT TITLE LOCATION TYPE  -------------------------------------------------------------------------------  This multiple contains the list of Non-MCCF-specific Pay-To Providers for this  VistA database.  CROSS  REFERENCED BY: TC FACILITY(B)  INDEXED BY: TC FACILITY (AC)  350.929,.01 TC FACILITY 0;1 POINTER TO INSTITUTION FILE (#4)  INPUT TRANSFORM: S DIC("S")="I $$SCRN4^IBJPS4(Y)" D ^DIC K DIC S  DIC=$G(DIE),X=+Y K:Y<0 X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Please choose the Non-MCCF-specific Pay-To  Provider from the Institution file.  DESCRIPTION: Enter a Non-MCCF-specific Pay-to Provider.  Usually, a Pay-to Provider is a medical center  (e.g. VAMC, M&ROC, etc.). If you enter only  one Non-MCCF-specific Pay-to Provider, it will  be the default Pay-to Provider for all Non-MCCF  claims and you would not need to associate  divisions with the default. Multiple Non-MCCF-  specific Pay-to Providers must be associated  with the divisions to which they apply.  SCREEN: S DIC("S")="I $$SCRN4^IBJPS4(Y)"  EXPLANATION: Inactive, not national, and pharmacy entries ar  e screened out.  CROSS-REFERENCE: 350.929^B  1)= S ^IBE(350.9,DA(1),29,"B",$E(X,1,30),DA)=""  2)= K ^IBE(350.9,DA(1),29,"B",$E(X,1,30),DA)  FIELD INDEX: AC (#871) MUMPS IR ACTION  Short Descr: Name and address defaults  Description: The purpose of this x-ref is to default the  name and address fields in this sub-file from  data found in the Institution file. The idea  is that the user will select a VA Institution  from file 4 to be one of the TRICARE-specific  Pay-To Providers in this sub-file. The name  and address of the VA Institution will be used  as defaults for the name and address fields  here in this sub-file. The default name and  address information may be overridden.  Set Logic: I $G(X1(1))'=$G(X2(1)) D DEF^IBJPS3(+$G(X2(1)),  .DA,1)  Kill Logic: Q  X(1): TC FACILITY (350.929,.01) (forwards)  350.929,.02 TC NAME 0;2 FREE TEXT (Required)  Non-MCCF Pay-to Provider Name  INPUT TRANSFORM: K:$L(X)>35!($L(X)<1) X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Answer must be 1-35 characters in length.  DESCRIPTION: You may modify the Non-MCCF-specific Pay-to  Provider name for use on electronic or printed  claims.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,.03 TC FEDERAL TAX NUMBER 0;3 FREE TEXT  Non-MCCF Pay-to Provider Federal Tax ID Number  INPUT TRANSFORM: K:$L(X)>10!($L(X)<10)!'(X?2N1"-"7N) X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Answer must be 10 characters in the format  NN-NNNNNNN.  DESCRIPTION: Enter the Federal Tax ID for the  Non-MCCF-specific Pay-to Provider. Make sure  you enter the Tax ID Number for the Non-MCCF  Pay-to Provider, which may be different from  your site's Tax ID. Enter 10 characters in the  format NN-NNNNNNN.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field if the .01 field is the same  institution as defined in the IB site  parameters field 350.9, .02.  350.929,.04 TC TELEPHONE NUMBER 0;4 FREE TEXT  Non-MCCF Pay-to Provider Phone Number  INPUT TRANSFORM: K:$L(X)>30!($L(X)<1) X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Answer must be 1-30 characters in length.  DESCRIPTION: Enter the phone number to be used on electronic  or printed claims. This is the number you  would want a payer to use to contact the site  about a Non-MCCF claim.  350.929,.05 TC PARENT PAY-TO PROVIDER 0;5 NUMBER  INPUT TRANSFORM: K:+X'=X!(X>9999)!(X<1)!(X?.E1"."1N.N) X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Type a number between 1 and 9999, 0 decimal  digits.  DESCRIPTION: This field determines if this entry in the  sub-file is a Non-MCCF Pay-to Provider  institution or if it is a Division being linked  to the parent Non-MCCF Pay-to Provider  institution, that is, another sub-file entry.    If this field is defined, then it holds the IEN  in this sub-file of the parent Non-MCCF Pay-to  Provider institution for this specific  division.    If this field is nil, then this sub-file entry  is the parent Non-MCCF Pay-to Provider  institution.    This field should not be set via FileMan. The  application in the IB Site Paremeter edit  option will set this field appropriately based  on user input.  350.929,1.01 TC STREET ADDRESS 1 1;1 FREE TEXT  Non-MCCF Pay-to Provider Address Line 1  INPUT TRANSFORM: K:$L(X)>55!($L(X)<1) X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Answer must be 1-55 characters in length.  DESCRIPTION: You may modify the Non-MCCF-specific Pay-To  Provider Address for use on electronic or  printed claims. You may enter a P.O. Box.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,1.02 TC STREET ADDRESS 2 1;2 FREE TEXT  Non-MCCF Pay-to Provider Address Line 2  INPUT TRANSFORM: K:$L(X)>55!($L(X)<1) X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Answer must be 1-55 characters in length.  DESCRIPTION: Enter additional address information, if  needed.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,1.03 TC CITY 1;3 FREE TEXT  Non-MCCF Pay-to Provider City  INPUT TRANSFORM: K:$L(X)>40!($L(X)<2) X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Answer must be 2-40 characters in length.  DESCRIPTION: You may modify the Non-MCCF Pay-to Provider  address for use on electronic or printed  claims.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,1.04 TC STATE 1;4 POINTER TO STATE FILE (#5)  Non-MCCF Pay-to Provider State  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Answer with State Number, or Name, or  Abbreviation.  DESCRIPTION: You may modify the Non-MCCF Pay-to Provider  address for use on electronic or printed  claims.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  350.929,1.05 TC ZIP 1;5 FREE TEXT  Non-MCCF Pay-to Provider Zip Code  INPUT TRANSFORM: K:$L(X)>15!($L(X)<3) X  LAST EDITED: FEB 22, 2018  HELP-PROMPT: Answer must be 3-15 characters in length.  DESCRIPTION: You may modify the Non-MCCF Pay-to Provider  address for use on electronic or printed  claims.  TECHNICAL DESCR: This field is initially set by the "AC" x-ref  of the .01 field.  FILES POINTED TO FIELDS  INSTITUTION (#4) TC FACILITY (#.01)  STATE (#5) TC STATE (#1.04)  INPUT TEMPLATE(S):  PRINT TEMPLATE(S):  SORT TEMPLATE(S):  FORM(S)/BLOCK(S): | |

* + Site Parameters’ Non-MCCF Rate Types for PTP sub-file - #350.928 (new)

| **Data Dictionary** | **Activities** |
| --- | --- |
| **FileName & Number** | Site Parameters’ Non-MCCF Rate Types for PTP sub-file (#350.928) |
| **Current Data Definitions** | |
| N/A | |
| **Modified Logic (Changes are in bold)** | |
| STANDARD DATA DICTIONARY #350.928 -- NON-MCCF RATE TYPES FOR PTP SUB-FILE 2/27/18 PAGE 1  STORED IN ^IBE(350.9,D0,28, SITE: PII UCI: VISTA,ROU  DATA NAME GLOBAL DATA  ELEMENT TITLE LOCATION TYPE  -------------------------------------------------------------------------------  This contains the Non-MCCF Rate Types that are related to the Non-MCCF Pay-To  Providers. If a claim has one of the rate types in this multiple field, the  claim is considered to be a Non-MCCF Claim.  CROSS  REFERENCED BY: NON-MCCF RATE TYPES FOR PTP(B)  350.928,.01 NON-MCCF RATE TYPES FOR PTP 0;1 POINTER TO RATE TYPE FILE (#399.3  ) (Multiply asked)  LAST EDITED: FEB 27, 2018  HELP-PROMPT: Enter Rate Types for which non-MCCF Pay to  Provider should be used.  DESCRIPTION: Each multiple field should be a Non-MCCF Rate  Type. It is used to determine if a claim is a  Non-MCCF Claim.  CROSS-REFERENCE: 350.928^B  1)= S ^IBE(350.9,DA(1),28,"B",$E(X,1,30),DA)=""  2)= K ^IBE(350.9,DA(1),28,"B",$E(X,1,30),DA)  FILES POINTED TO FIELDS  RATE TYPE (#399.3) NON-MCCF RATE TYPES FOR PTP (#.01)  INPUT TEMPLATE(S):  PRINT TEMPLATE(S):  SORT TEMPLATE(S):  FORM(S)/BLOCK(S): | |

1. Routines:

* To change the name of #12 from “TRICARE Pay-To Providers” to “Non-MCCF Pay-To Providers” on initial IB Screen for MCCR Site Parameters (see below);

**IB Site Parameters** Nov 27, 2017@14:49:21 Page: 3 of 5

Only authorized persons may edit this data.

+

**[10]**Bill Signer Name : <No longer used> Federal Tax # : 83-0168494

Bill Signer Title : <No longer used>

**[11]**Pay-To Providers : 3 defined, default - CENTRAL PLAINS CPAC (CHEYENNE,44

**[12]**TRICARE Pay-To Providers: 2 defined, default - CHEYENNE VAMC

**[13]**Inpt Health Summary: INPATIENT HEALTH SUMMARY

Opt Health Summary : OUTPATIENT HEALTH SUMMARY

**[14]**HIPPA NCPDP Active Flag : Active

**[15]**Inpatient TP Active : YES

Outpatient TP Active: YES

Pharmacy TP Active : YES

Prosthetic TP Active: YES

+ Enter ?? for more actions

EP Edit Set EX Exit

Select Action: Next Screen//

the routine ^IBJPS2, needed to be modified:

| **Routines** | **Activities** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Routine Name** | IBJPS2 | | | | | | | | |
| **Enhancement Category** | New | | Modify | Delete | | | No Change | | |
| **RTM** |  | | | | | | | | |
| **Related Options** | None | | | | | | | | |
| **Related Routines** | **Routines “Called By”** | | | | | **Routines “Called”** | | | |
|  |  | | | | |  | | | |
| **Data Dictionary (DD) References** | None | | | | | | | | |
| **Related Protocols** | None | | | | | | | | |
| **Related Integration Control Registrations (ICRs)** | None | | | | | | | | |
| **Data Passing** | Input | Output Reference | | | Both | | | Global Reference | Local |
| **Input Attribute Name and Definition** | Name:  Definition: | | | | | | | | |
| **Output Attribute Name and Definition** | Name:  Definition: | | | | | | | | |
| **Current Logic** | | | | | | | | | |
| IBJPS2 ;ALB/MAF,ARH - IBSP IB SITE PARAMETER BUILD (cont) ;22-DEC-1995  ;;2.0;INTEGRATED BILLING;\*\*39,52,115,143,51,137,161,155,320,348,349,377,384,400,432,494,461,516,547,592\*\*;21-MAR-94;Build 25  ;;Per VA Directive 6402, this routine should not be modified.  ; BLD2 ; - continue build screen array for IB parameters  ;  N Z,Z0,PTPSTR,BPZZ  D RIGHT(1,1,1) ; - facility/med center (new line for each)  S IBLN=$$SET("Medical Center",$$EXSET^IBJU1($P(IBPD0,U,2),350.9,.02),IBLN,IBLR,IBSEL)  S IBLN=$$SET("MAS Service",$$EXSET^IBJU1($P(IBPD1,U,14),350.9,1.14),IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("Default Division",$$EXSET^IBJU1($P(IBPD1,U,25),350.9,1.25),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Billing Supervisor",$$EXSET^IBJU1($P(IBPD1,U,8),350.9,1.08),IBLN,IBLR,IBSEL)  ;  D RIGHT(1,1,1)  S IBLN=$$SET("Initiator Authorize",$$YN(+$P(IBPD1,U,23)),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Ask HINQ in MCCR",$$YN(+$P(IBPD1,U,16)),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Multiple Form Types",$$YN(+$P(IBPD1,U,22)),IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("Xfer Proc to Sched",$$YN(+$P(IBPD1,U,19)),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Use Non-PTF Codes",$$YN(+$P(IBPD1,U,15)),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Use OP CPT screen",$$YN(+$P(IBPD1,U,17)),IBLN,IBLR,IBSEL)  ;  ; IB patch 349 for UB-04 claim form and parameters  D RIGHT(1,1,1)  S IBLN=$$SET("UB-04 Print IDs",$$EXSET^IBJU1($P(IBPD1,U,33),350.9,1.33),IBLN,IBLR,IBSEL)  S IBLN=$$SET("CMS-1500 Print IDs",$$EXSET^IBJU1($P(IBPD1,U,32),350.9,1.32),IBLN,IBLR,IBSEL)  S IBLN=$$SET("CMS-1500 Auto Prter",$$EXSET^IBJU1($P(IBPD8,U,14),350.9,8.14),IBLN,IBLR,IBSEL)  S IBLN=$$SET("EOB Auto Prter",$$EXSET^IBJU1($P(IBPD8,U,16),350.9,8.16),IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("UB-04 Address Col",$P(IBPD1,U,31),IBLN,IBLR,IBSEL)  S IBLN=$$SET("CMS-1500 Addr Col",$P(IBPD1,U,27),IBLN,IBLR,IBSEL)  S IBLN=$$SET("UB-04 Auto Prter",$$EXSET^IBJU1($P(IBPD8,U,15),350.9,8.15),IBLN,IBLR,IBSEL)  S IBLN=$$SET("MRA Auto Prter",$$EXSET^IBJU1($P(IBPD8,U,19),350.9,8.19),IBLN,IBLR,IBSEL)  ;  ; VAD - IB\*2.0\*547 - inserted a new section 8. Only count activated codes  D RIGHT(3,1,1)  S (Z,Z0)=0 F  S Z=$O(^IBE(350.9,1,15,"B",Z)) Q:'Z  I $P($G(^DGCR(399.2,Z,0)),U,3)=1 S Z0=Z0+1  S PTPSTR=Z0\_" Activated Codes Defined"  S IBLN=$$SET("Printed Claims Rev Code Excl",PTPSTR,IBLN,IBLR,IBSEL)  ;  D RIGHT(1,1,1)  S Z=$$ICD9SYS^IBACSV(DT)  I Z=1 S IBLN=$$SET("Default RX DX Cd",$$EXSET^IBJU1($P(IBPD1,U,29),350.9,1.29)\_" (ICD-9)",IBLN,IBLR,IBSEL)  I Z'=1 S IBLN=$$SET("Default RX DX Cd",$$EXSET^IBJU1($P(IBPD7,U,5),350.9,7.05)\_" (ICD-10)",IBLN,IBLR,IBSEL)  S IBLN=$$SET("Default RX CPT Cd",$$EXSET^IBJU1($P(IBPD1,U,30),350.9,1.30),IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("Default ASC Rev Cd",$$EXSET^IBJU1($P(IBPD1,U,18),350.9,1.18),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Default RX Rev Cd",$$EXSET^IBJU1($P(IBPD1,U,28),350.9,1.28),IBLN,IBLR,IBSEL)  ;  D RIGHT(1,1,1)  S IBLN=$$SET("Bill Signer Name","<No longer used>",IBLN,IBLR,IBSEL)  S IBLN=$$SET("Bill Signer Title","<No longer used>",IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("Federal Tax #",$P(IBPD1,U,5),IBLN,IBLR,IBSEL)  ;  D RIGHT(3,1,1) ; - Pay-To Providers - section 11  S (Z,Z0)=0 F  S Z=$O(^IBE(350.9,1,19,Z)) Q:'Z  S:$P($G(^IBE(350.9,1,19,Z,0)),U,5)="" Z0=Z0+1  S Z=+$P($G(^IBE(350.9,1,11)),U,3),PTPSTR=Z0\_" defined"\_$S(Z>0:", default - "\_$P($$PTG^IBJPS3(Z,0),U),1:"")  S IBLN=$$SET("Pay-To Providers",PTPSTR,IBLN,IBLR,IBSEL)  ;  ; MRD;IB\*2.0\*516 - Added TRICARE Pay-To Providers.  D RIGHT(3,1,1) ; - TRICARE Pay-To Providers - section 12  S (Z,Z0)=0 F  S Z=$O(^IBE(350.9,1,29,Z)) Q:'Z  S:$P($G(^IBE(350.9,1,29,Z,0)),U,5)="" Z0=Z0+1  S Z=+$P($G(^IBE(350.9,1,11)),U,4),PTPSTR=Z0\_" defined"\_$S(Z>0:", default - "\_$P($$PTG^IBJPS3(Z,1),U),1:"")  S IBLN=$$SET("TRICARE Pay-To Providers",PTPSTR,IBLN,IBLR,IBSEL)  ; | | | | | | | | | |
| **Modified Logic (Changes are in bold)** | | | | | | | | | |
| IBJPS2 ;ALB/MAF,ARH - IBSP IB SITE PARAMETER BUILD (cont) ;22-DEC-1995  ;;2.0;INTEGRATED BILLING;\*\*39,52,115,143,51,137,161,155,320,348,349,377,384,400,432,494,461,516,547,592,608\*\*;21-MAR-94;Build 25  ;;Per VA Directive 6402, this routine should not be modified.  ; BLD2 ; - continue build screen array for IB parameters  ;  N Z,Z0,PTPSTR,BPZZ  D RIGHT(1,1,1) ; - facility/med center (new line for each)  S IBLN=$$SET("Medical Center",$$EXSET^IBJU1($P(IBPD0,U,2),350.9,.02),IBLN,IBLR,IBSEL)  S IBLN=$$SET("MAS Service",$$EXSET^IBJU1($P(IBPD1,U,14),350.9,1.14),IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("Default Division",$$EXSET^IBJU1($P(IBPD1,U,25),350.9,1.25),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Billing Supervisor",$$EXSET^IBJU1($P(IBPD1,U,8),350.9,1.08),IBLN,IBLR,IBSEL)  ;  D RIGHT(1,1,1)  S IBLN=$$SET("Initiator Authorize",$$YN(+$P(IBPD1,U,23)),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Ask HINQ in MCCR",$$YN(+$P(IBPD1,U,16)),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Multiple Form Types",$$YN(+$P(IBPD1,U,22)),IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("Xfer Proc to Sched",$$YN(+$P(IBPD1,U,19)),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Use Non-PTF Codes",$$YN(+$P(IBPD1,U,15)),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Use OP CPT screen",$$YN(+$P(IBPD1,U,17)),IBLN,IBLR,IBSEL)  ;  ; IB patch 349 for UB-04 claim form and parameters  D RIGHT(1,1,1)  S IBLN=$$SET("UB-04 Print IDs",$$EXSET^IBJU1($P(IBPD1,U,33),350.9,1.33),IBLN,IBLR,IBSEL)  S IBLN=$$SET("CMS-1500 Print IDs",$$EXSET^IBJU1($P(IBPD1,U,32),350.9,1.32),IBLN,IBLR,IBSEL)  S IBLN=$$SET("CMS-1500 Auto Prter",$$EXSET^IBJU1($P(IBPD8,U,14),350.9,8.14),IBLN,IBLR,IBSEL)  S IBLN=$$SET("EOB Auto Prter",$$EXSET^IBJU1($P(IBPD8,U,16),350.9,8.16),IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("UB-04 Address Col",$P(IBPD1,U,31),IBLN,IBLR,IBSEL)  S IBLN=$$SET("CMS-1500 Addr Col",$P(IBPD1,U,27),IBLN,IBLR,IBSEL)  S IBLN=$$SET("UB-04 Auto Prter",$$EXSET^IBJU1($P(IBPD8,U,15),350.9,8.15),IBLN,IBLR,IBSEL)  S IBLN=$$SET("MRA Auto Prter",$$EXSET^IBJU1($P(IBPD8,U,19),350.9,8.19),IBLN,IBLR,IBSEL)  ;  ; VAD - IB\*2.0\*547 - inserted a new section 8. Only count activated codes  D RIGHT(3,1,1)  S (Z,Z0)=0 F  S Z=$O(^IBE(350.9,1,15,"B",Z)) Q:'Z  I $P($G(^DGCR(399.2,Z,0)),U,3)=1 S Z0=Z0+1  S PTPSTR=Z0\_" Activated Codes Defined"  S IBLN=$$SET("Printed Claims Rev Code Excl",PTPSTR,IBLN,IBLR,IBSEL)  ;  D RIGHT(1,1,1)  S Z=$$ICD9SYS^IBACSV(DT)  I Z=1 S IBLN=$$SET("Default RX DX Cd",$$EXSET^IBJU1($P(IBPD1,U,29),350.9,1.29)\_" (ICD-9)",IBLN,IBLR,IBSEL)  I Z'=1 S IBLN=$$SET("Default RX DX Cd",$$EXSET^IBJU1($P(IBPD7,U,5),350.9,7.05)\_" (ICD-10)",IBLN,IBLR,IBSEL)  S IBLN=$$SET("Default RX CPT Cd",$$EXSET^IBJU1($P(IBPD1,U,30),350.9,1.30),IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("Default ASC Rev Cd",$$EXSET^IBJU1($P(IBPD1,U,18),350.9,1.18),IBLN,IBLR,IBSEL)  S IBLN=$$SET("Default RX Rev Cd",$$EXSET^IBJU1($P(IBPD1,U,28),350.9,1.28),IBLN,IBLR,IBSEL)  ;  D RIGHT(1,1,1)  S IBLN=$$SET("Bill Signer Name","<No longer used>",IBLN,IBLR,IBSEL)  S IBLN=$$SET("Bill Signer Title","<No longer used>",IBLN,IBLR,IBSEL)  ;  D LEFT(2)  S IBLN=$$SET("Federal Tax #",$P(IBPD1,U,5),IBLN,IBLR,IBSEL)  ;  D RIGHT(3,1,1) ; - Pay-To Providers - section 11  S (Z,Z0)=0 F  S Z=$O(^IBE(350.9,1,19,Z)) Q:'Z  S:$P($G(^IBE(350.9,1,19,Z,0)),U,5)="" Z0=Z0+1  S Z=+$P($G(^IBE(350.9,1,11)),U,3),PTPSTR=Z0\_" defined"\_$S(Z>0:", default - "\_$P($$PTG^IBJPS3(Z,0),U),1:"")  S IBLN=$$SET("Pay-To Providers",PTPSTR,IBLN,IBLR,IBSEL)  ;  ; MRD;IB\*2.0\*516 - Added TRICARE Pay-To Providers.  D RIGHT(3,1,1) ; - TRICARE Pay-To Providers - section 12  S (Z,Z0)=0 F  S Z=$O(^IBE(350.9,1,29,Z)) Q:'Z  S:$P($G(^IBE(350.9,1,29,Z,0)),U,5)="" Z0=Z0+1  S Z=+$P($G(^IBE(350.9,1,11)),U,4),PTPSTR=Z0\_" defined"\_$S(Z>0:", default - "\_$P($$PTG^IBJPS3(Z,1),U),1:"")  S IBLN=$$SET("Non-MCCF Pay-To Providers",PTPSTR,IBLN,IBLR,IBSEL) ; IB\*2\*608 (vd) - Changed "TRICARE..." to "Non-MCCF..."  ; | | | | | | | | | |

* Changed the ENTITY NAME and SCREEN TITLE on the “IBJP IB TRICARE PAY-TO PROVS” List Manager Template which is invoked by the “EP” (Edit Set) action on the IB Site Parameters screen from:

List Manager Workbench Nov 27, 2017@16:56:57 Page: 1 of 1

Template: **IBJP IB TRICARE PAY-TO PROVS**

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

Demographics List Region

Template Name: IBJP IB TRICARE PAY-TO PROVS Top Margin: 2

Entity Name: IB TRICARE Pay-To Providers Bottom " : 18

Screen Title: TRICARE Pay-To Providers Right " : 80

Protocol Information Other Fields

Type of List: PROTOCOL OK to Transport?: OK

Protocol Menu: IBJP IB TRICARE PAY-TO PROV Use Cursor Control: YES

Print Protocol: Allowable Number of Actions: 1

Hidden Menu: VALM HIDDEN ACTIONS Date Range Limit:

Automatic Defaults: YES

MUMPS Code Related

Header: D HDR^IBJPS3(1)

Entry: D INIT^IBJPS3(1)

Exit: D EXIT^IBJPS3

Expand:

Help: D HELP^IBJPS3

Array:

Caption Line Information

Name Column Width Display Text Video Scroll Lock

to:

List Manager Workbench Nov 27, 2017@16:56:57 Page: 1 of 1

Template: **IBJP IB TRICARE PAY-TO PROVS**

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Demographics List Region

Template Name: IBJP IB TRICARE PAY-TO PROVS Top Margin: 2

Entity Name: IB Non-MCCR Pay-To Providers Bottom " : 18

Screen Title: Non-MCCR Pay-To Providers Right " : 80

Protocol Information Other Fields

Type of List: PROTOCOL OK to Transport?: OK

Protocol Menu: IBJP IB TRICARE PAY-TO PROV Use Cursor Control: YES

Print Protocol: Allowable Number of Actions: 1

Hidden Menu: VALM HIDDEN ACTIONS Date Range Limit:

Automatic Defaults: YES

MUMPS Code Related

Header: D HDR^IBJPS3(1)

Entry: D INIT^IBJPS3(1)

Exit: D EXIT^IBJPS3

Expand:

Help: D HELP^IBJPS3

Array:

Caption Line Information

Name Column Width Display Text Video Scroll Lock

In addition, the routine ^IBJPS3 was changed to display “Non-MCCF” instead of “TRICARE” on the List Manager screens for prompts and messages:

| **Routines** | **Activities** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Routine Name** | IBJPS3 | | | | | | | | |
| **Enhancement Category** | New | | Modify | Delete | | | No Change | | |
| **RTM** |  | | | | | | | | |
| **Related Options** | None | | | | | | | | |
| **Related Routines** | **Routines “Called By”** | | | | | **Routines “Called”** | | | |
|  |  | | | | |  | | | |
| **Data Dictionary (DD) References** | None | | | | | | | | |
| **Related Protocols** | None | | | | | | | | |
| **Related Integration Control Registrations (ICRs)** | None | | | | | | | | |
| **Data Passing** | Input | Output Reference | | | Both | | | Global Reference | Local |
| **Input Attribute Name and Definition** | Name:  Definition: | | | | | | | | |
| **Output Attribute Name and Definition** | Name:  Definition: | | | | | | | | |
| **Current Logic** | | | | | | | | | |
| IBJPS3 ;BP/YMG - IB Site Parameters, Pay-To Provider ;20-Oct-2008  ;;2.0;INTEGRATED BILLING;\*\*400,432,516,577\*\*;21-MAR-94;Build 38  ;;Per VA Directive 6402, this routine should not be modified.  ;  ; MRD;IB\*2.0\*516 - Added logic pertaining to TRICARE-Specific Pay-To  ; Providers, which entailed adding the parameter IBTCFLAG to many  ; procedures here and in ^IBJPS4.  ; EN(IBTCFLAG) ; -- main entry point for IBJP IB PAY-TO PROVIDERS  D EN^VALM("IBJP IB "\_$S(IBTCFLAG:"TRICARE PAY-TO PROVS",1:"PAY-TO PROVIDERS"))  Q  ; HDR(IBTCFLAG) ; -- header code  ; Not setting VALMHDR causes this tag to be called upon return from every action,   ; this is done to keep VALMSG displayed at all times, instead of the default message on the lower bar.  S VALMSG="\* = Default "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-to provider"  Q  ; INIT(IBTCFLAG) ; -- init variables and list array  N IBCNT,IBLN,IBSTR,PIEN,PDATA,IBNODE  S IBNODE=$$NODE^IBJPS4(IBTCFLAG)  ;  S (VALMCNT,IBCNT,IBLN)=0  S PIEN=0 F  S PIEN=$O(^IBE(350.9,1,IBNODE,PIEN)) Q:'PIEN  D  .I $P($G(^IBE(350.9,1,IBNODE,PIEN,0)),U,5)'="" Q  .S PDATA=$$PTG(PIEN,IBTCFLAG),IBCNT=IBCNT+1  .S IBSTR=$$SETSTR^VALM1(IBCNT\_".","",2,4)  .I $$ISDFLT(PIEN,IBTCFLAG) S IBSTR=$$SETSTR^VALM1("\*",IBSTR,7,1)  .S IBSTR=$$SETSTR^VALM1("Name : "\_$P(PDATA,U),IBSTR,8,45)  .;S IBSTR=$$SETSTR^VALM1("State : "\_$P(PDATA,U,8),IBSTR,54,25) ;JRA IB\*2.0\*577 ';'  .S IBLN=$$SET(IBLN,IBSTR)  .;S IBSTR=$$SETSTR^VALM1("Address 1: "\_$P(PDATA,U,5),"",8,45) ;JRA IB\*2.0\*577 ';'  .S IBSTR=$$SETSTR^VALM1("Address 1: "\_$P(PDATA,U,5),"",8,66) ;JRA IB\*2.0\*577 expand to 55 chars  .;S IBSTR=$$SETSTR^VALM1("Zip Code: "\_$P(PDATA,U,9),IBSTR,54,25) ;JRA IB\*2.0\*577 ';'  .S IBLN=$$SET(IBLN,IBSTR)  .;S IBSTR=$$SETSTR^VALM1("Address 2: "\_$P(PDATA,U,6),"",8,45) ;JRA IB\*2.0\*577 ';'  .S IBSTR=$$SETSTR^VALM1("Address 2: "\_$P(PDATA,U,6),"",8,66) ;JRA IB\*2.0\*577 expand to 55 chars  .;S IBSTR=$$SETSTR^VALM1("Phone : "\_$P(PDATA,U,4),IBSTR,54,25) ;JRA IB\*2.0\*577 ';'  .S IBLN=$$SET(IBLN,IBSTR)  .S IBSTR=$$SETSTR^VALM1("City : "\_$P(PDATA,U,7),"",8,45)  .S IBLN=$$SET(IBLN,IBSTR)  .;S IBSTR=$$SETSTR^VALM1("Tax ID : "\_$P(PDATA,U,3),IBSTR,54,25) ;JRA IB\*2.0\*577 ';'  .;JRA Move State, Zip Code, Phone and Tax ID under City to allow for longer address lines  .S IBSTR=$$SETSTR^VALM1("State : "\_$P(PDATA,U,8),IBSTR,8,25) ;JRA IB\*2.0\*577  .S IBLN=$$SET(IBLN,IBSTR) ;JRA IB\*2.0\*577  .S IBSTR=$$SETSTR^VALM1("Zip Code : "\_$P(PDATA,U,9),IBSTR,8,25) ;JRA IB\*2.0\*577  .S IBLN=$$SET(IBLN,IBSTR) ;JRA IB\*2.0\*577  .S IBSTR=$$SETSTR^VALM1("Phone : "\_$P(PDATA,U,4),IBSTR,8,25) ;JRA IB\*2.0\*577  .S IBLN=$$SET(IBLN,IBSTR) ;JRA IB\*2.0\*577  .S IBSTR=$$SETSTR^VALM1("Tax ID : "\_$P(PDATA,U,3),IBSTR,8,25) ;JRA IB\*2.0\*577  .S IBLN=$$SET(IBLN,IBSTR),IBLN=$$SET(IBLN,"")  .S @VALMAR@("ZIDX",IBCNT,PIEN)=""  .Q  ;  I 'IBLN S IBLN=$$SET(IBLN,$$SETSTR^VALM1("No "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-To Providers defined.","",13,40))  ;  S VALMCNT=IBLN,VALMBG=1  Q  ; HELP ; -- help code  S X="?" D DISP^XQORM1 W !!  Q  ; EXIT ; -- exit code  D CLEAR^VALM1,CLEAN^VALM10  Q  ; PRVADD(IBTCFLAG) ; add new pay-to provider  N X,Y,DIC,DA,DLAYGO,DIE,DR,DIR,DIRUT,DUOUT,DTOUT,IEN,IBNODE  S IBNODE=$$NODE^IBJPS4(IBTCFLAG)  D FULL^VALM1  S VALMBCK="R"  S DIC="^IBE(350.9,1,"\_IBNODE\_",",DIC(0)="AELMQ",DA(1)=1,DLAYGO=350.9  S DIC("A")="Enter "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-to Provider: "  D ^DIC S IEN=+Y  I IEN'>0 Q  D PRVEDIT1  I $P($G(^IBE(350.9,1,IBNODE,IEN,0)),U,2)="" D PRVDEL1  Q  ; PRVDEL(IBTCFLAG) ; delete a pay-to provider  N DA,DR,DIE,X,Y,DIR,DIRUT,DUOUT,DTOUT,I,IEN,DIVS,DFLT,IBNODE,IBDISP  S IBNODE=$$NODE^IBJPS4(IBTCFLAG)  S IBDISP=$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-To Provider"  S VALMBCK="R"  D FULL^VALM1  S IEN=$$SEL(IBTCFLAG) Q:'IEN  S DFLT=$$ISDFLT(IEN,IBTCFLAG)  I DFLT W !!,"WARNING: This is the default "\_IBDISP\_"."  D GETDIVS^IBJPS4(IEN,.DIVS,IBTCFLAG)  I 'DFLT D  .W !!,"The following divisions are currently associated with this "\_IBDISP\_": "  .S I="" F  S I=$O(DIVS(I)) Q:I=""  W !,?5,DIVS(I)  .W:'$D(DIVS) "None",! W !  .Q  S DIR("?")="Enter Yes to delete this "\_IBDISP\_"."  S DIR("A")="Delete "\_IBDISP\_" "\_$P($G(^IBE(350.9,1,IBNODE,IEN,0)),U,2)  S DIR(0)="YO",DIR("B")="NO" D ^DIR Q:'Y  I DFLT S DIE="^IBE(350.9,",DA=1,DR=$S(IBTCFLAG:"11.04",1:"11.03")\_"////@" D ^DIE  I $D(DIVS) K DIK S DIK="^IBE(350.9,1,"\_IBNODE\_",",DA(1)=1,I="" F  S I=$O(DIVS(I)) Q:I=""  S DA=I D ^DIK  K DIK PRVDEL1 ;  N DIK  K DA  S DIK="^IBE(350.9,1,"\_IBNODE\_","  S DA(1)=1,DA=IEN  D ^DIK  D CLEAN^VALM10,INIT(IBTCFLAG)  Q  ; PRVEDIT(IBTCFLAG) ; edit existing pay-to provider  N IEN,IBNODE  S IBNODE=$$NODE^IBJPS4(IBTCFLAG)  S VALMBCK="R"  D FULL^VALM1  S IEN=$$SEL(IBTCFLAG) Q:'IEN PRVEDIT1 ;  N DIE,DA,DR,DIR,DIRUT,DUOUT,DTOUT,X,Y  S DIE="^IBE(350.9,1,"\_IBNODE\_","  S DA=IEN,DA(1)=1  S DR=".02T;1.01T;1.02T;1.03T;1.04T;1.05T;.04T;.03T;.05///@"  D ^DIE  S DIR("?")="Enter Yes to make this entry the default "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-to Provider."  S DIR("A")="Is this the default "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-To Provider"  S DIR(0)="YO"  S DIR("B")="YES" I $$GETDFLT(IBTCFLAG),'$$ISDFLT(IEN,IBTCFLAG) S DIR("B")="NO"  D ^DIR I Y K DA S DIE="^IBE(350.9,",DA=1,DR=$S(IBTCFLAG:"11.04",1:"11.03")\_"////"\_IEN D ^DIE  D CLEAN^VALM10,INIT(IBTCFLAG)  Q  ; SET(IBLN,IBSTR) ; add a line to display list  ; returns line number added  S IBLN=IBLN+1 D SET^VALM10(IBLN,IBSTR)  Q IBLN  ; ISDFLT(PIEN,IBTCFLAG) ; returns 1 if provider with ien PIEN is the default pay-to provider, 0 otherwise  Q:PIEN="" 0  Q $$GETDFLT(IBTCFLAG)=PIEN  ; GETDFLT(IBTCFLAG) ; returns ien of default pay-to provider  Q $P($G(^IBE(350.9,1,11)),U,$S(IBTCFLAG:4,1:3))  ; SEL(IBTCFLAG) ; select pay-to provider  ; returns ien of selected pay-to provider, or 0 if nothing is selected  N DIR,IEN,MAX,X,Y  S IEN=0  I VALMLST>4 D  . ; there is at least one entry  . S MAX=$O(@VALMAR@("ZIDX",""),-1) S:MAX=1 Y=1  . I MAX>1 D  . . S DIR("A")="Select "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-To Provider (1-"\_MAX\_"): "  . . S DIR(0)="NA^"\_1\_":"\_MAX\_":0"  . . D ^DIR  . . Q  . S:+Y>0 IEN=$O(@VALMAR@("ZIDX",Y,""))  . Q  Q +IEN ; | | | | | | | | | |
| **Modified Logic (Changes are in bold)** | | | | | | | | | |
| IBJPS3 ;BP/YMG - IB Site Parameters, Pay-To Provider ;20-Oct-2008  ;;2.0;INTEGRATED BILLING;\*\*400,432,516,577,608\*\*;21-MAR-94;Build 38  ;;Per VA Directive 6402, this routine should not be modified.  ;  ; MRD;IB\*2.0\*516 - Added logic pertaining to TRICARE-Specific Pay-To  ; Providers, which entailed adding the parameter IBTCFLAG to many  ; procedures here and in ^IBJPS4.  ; EN(IBTCFLAG) ; -- main entry point for IBJP IB PAY-TO PROVIDERS  D EN^VALM("IBJP IB "\_$S(IBTCFLAG:"TRICARE PAY-TO PROVS",1:"PAY-TO PROVIDERS"))  Q  ; HDR(IBTCFLAG) ; -- header code  ; Not setting VALMHDR causes this tag to be called upon return from every action,   ; this is done to keep VALMSG displayed at all times, instead of the default message on the lower bar.  ;/IB\*2.0\*608 – vd (US2599) Changed TRICARE to Non-MCCF.  S VALMSG="\* = Default "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-to provider"  Q  ; INIT(IBTCFLAG) ; -- init variables and list array  N IBCNT,IBLN,IBSTR,PIEN,PDATA,IBNODE  S IBNODE=$$NODE^IBJPS4(IBTCFLAG)  ;  S (VALMCNT,IBCNT,IBLN)=0  S PIEN=0 F  S PIEN=$O(^IBE(350.9,1,IBNODE,PIEN)) Q:'PIEN  D  .I $P($G(^IBE(350.9,1,IBNODE,PIEN,0)),U,5)'="" Q  .S PDATA=$$PTG(PIEN,IBTCFLAG),IBCNT=IBCNT+1  .S IBSTR=$$SETSTR^VALM1(IBCNT\_".","",2,4)  .I $$ISDFLT(PIEN,IBTCFLAG) S IBSTR=$$SETSTR^VALM1("\*",IBSTR,7,1)  .S IBSTR=$$SETSTR^VALM1("Name : "\_$P(PDATA,U),IBSTR,8,45)  .;S IBSTR=$$SETSTR^VALM1("State : "\_$P(PDATA,U,8),IBSTR,54,25) ;JRA IB\*2.0\*577 ';'  .S IBLN=$$SET(IBLN,IBSTR)  .;S IBSTR=$$SETSTR^VALM1("Address 1: "\_$P(PDATA,U,5),"",8,45) ;JRA IB\*2.0\*577 ';'  .S IBSTR=$$SETSTR^VALM1("Address 1: "\_$P(PDATA,U,5),"",8,66) ;JRA IB\*2.0\*577 expand to 55 chars  .;S IBSTR=$$SETSTR^VALM1("Zip Code: "\_$P(PDATA,U,9),IBSTR,54,25) ;JRA IB\*2.0\*577 ';'  .S IBLN=$$SET(IBLN,IBSTR)  .;S IBSTR=$$SETSTR^VALM1("Address 2: "\_$P(PDATA,U,6),"",8,45) ;JRA IB\*2.0\*577 ';'  .S IBSTR=$$SETSTR^VALM1("Address 2: "\_$P(PDATA,U,6),"",8,66) ;JRA IB\*2.0\*577 expand to 55 chars  .;S IBSTR=$$SETSTR^VALM1("Phone : "\_$P(PDATA,U,4),IBSTR,54,25) ;JRA IB\*2.0\*577 ';'  .S IBLN=$$SET(IBLN,IBSTR)  .S IBSTR=$$SETSTR^VALM1("City : "\_$P(PDATA,U,7),"",8,45)  .S IBLN=$$SET(IBLN,IBSTR)  .;S IBSTR=$$SETSTR^VALM1("Tax ID : "\_$P(PDATA,U,3),IBSTR,54,25) ;JRA IB\*2.0\*577 ';'  .;JRA Move State, Zip Code, Phone and Tax ID under City to allow for longer address lines  .S IBSTR=$$SETSTR^VALM1("State : "\_$P(PDATA,U,8),IBSTR,8,25) ;JRA IB\*2.0\*577  .S IBLN=$$SET(IBLN,IBSTR) ;JRA IB\*2.0\*577  .S IBSTR=$$SETSTR^VALM1("Zip Code : "\_$P(PDATA,U,9),IBSTR,8,25) ;JRA IB\*2.0\*577  .S IBLN=$$SET(IBLN,IBSTR) ;JRA IB\*2.0\*577  .S IBSTR=$$SETSTR^VALM1("Phone : "\_$P(PDATA,U,4),IBSTR,8,25) ;JRA IB\*2.0\*577  .S IBLN=$$SET(IBLN,IBSTR) ;JRA IB\*2.0\*577  .S IBSTR=$$SETSTR^VALM1("Tax ID : "\_$P(PDATA,U,3),IBSTR,8,25) ;JRA IB\*2.0\*577  .S IBLN=$$SET(IBLN,IBSTR),IBLN=$$SET(IBLN,"")  .S @VALMAR@("ZIDX",IBCNT,PIEN)=""  .Q  ;  ;/IB\*2.0\*608 – vd (US2599) Changed TRICARE to Non-MCCF.  I 'IBLN S IBLN=$$SET(IBLN,$$SETSTR^VALM1("No "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-To Providers defined.","",13,40))  ;  S VALMCNT=IBLN,VALMBG=1  Q  ; HELP ; -- help code  S X="?" D DISP^XQORM1 W !!  Q  ; EXIT ; -- exit code  D CLEAR^VALM1,CLEAN^VALM10  Q  ; PRVADD(IBTCFLAG) ; add new pay-to provider  N X,Y,DIC,DA,DLAYGO,DIE,DR,DIR,DIRUT,DUOUT,DTOUT,IEN,IBNODE  S IBNODE=$$NODE^IBJPS4(IBTCFLAG)  D FULL^VALM1  S VALMBCK="R"  S DIC="^IBE(350.9,1,"\_IBNODE\_",",DIC(0)="AELMQ",DA(1)=1,DLAYGO=350.9  ;/IB\*2.0\*608 – vd (US2599) Changed TRICARE to Non-MCCF.  S DIC("A")="Enter "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-to Provider: "  D ^DIC S IEN=+Y  I IEN'>0 Q  D PRVEDIT1  I $P($G(^IBE(350.9,1,IBNODE,IEN,0)),U,2)="" D PRVDEL1  Q  ; PRVDEL(IBTCFLAG) ; delete a pay-to provider  N DA,DR,DIE,X,Y,DIR,DIRUT,DUOUT,DTOUT,I,IEN,DIVS,DFLT,IBNODE,IBDISP  S IBNODE=$$NODE^IBJPS4(IBTCFLAG)  ;/IB\*2.0\*608 – vd (US2599) Changed TRICARE to Non-MCCF.  S IBDISP=$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-To Provider"  S VALMBCK="R"  D FULL^VALM1  S IEN=$$SEL(IBTCFLAG) Q:'IEN  S DFLT=$$ISDFLT(IEN,IBTCFLAG)  I DFLT W !!,"WARNING: This is the default "\_IBDISP\_"."  D GETDIVS^IBJPS4(IEN,.DIVS,IBTCFLAG)  I 'DFLT D  .W !!,"The following divisions are currently associated with this "\_IBDISP\_": "  .S I="" F  S I=$O(DIVS(I)) Q:I=""  W !,?5,DIVS(I)  .W:'$D(DIVS) "None",! W !  .Q  S DIR("?")="Enter Yes to delete this "\_IBDISP\_"."  S DIR("A")="Delete "\_IBDISP\_" "\_$P($G(^IBE(350.9,1,IBNODE,IEN,0)),U,2)  S DIR(0)="YO",DIR("B")="NO" D ^DIR Q:'Y  I DFLT S DIE="^IBE(350.9,",DA=1,DR=$S(IBTCFLAG:"11.04",1:"11.03")\_"////@" D ^DIE  I $D(DIVS) K DIK S DIK="^IBE(350.9,1,"\_IBNODE\_",",DA(1)=1,I="" F  S I=$O(DIVS(I)) Q:I=""  S DA=I D ^DIK  K DIK PRVDEL1 ;  N DIK  K DA  S DIK="^IBE(350.9,1,"\_IBNODE\_","  S DA(1)=1,DA=IEN  D ^DIK  D CLEAN^VALM10,INIT(IBTCFLAG)  Q  ; PRVEDIT(IBTCFLAG) ; edit existing pay-to provider  N IEN,IBNODE  S IBNODE=$$NODE^IBJPS4(IBTCFLAG)  S VALMBCK="R"  D FULL^VALM1  S IEN=$$SEL(IBTCFLAG) Q:'IEN PRVEDIT1 ;  N DIE,DA,DR,DIR,DIRUT,DUOUT,DTOUT,X,Y  S DIE="^IBE(350.9,1,"\_IBNODE\_","  S DA=IEN,DA(1)=1  S DR=".02T;1.01T;1.02T;1.03T;1.04T;1.05T;.04T;.03T;.05///@"  D ^DIE  ;/IB\*2.0\*608 – vd (US2599) Changed TRICARE to Non-MCCF.  S DIR("?")="Enter Yes to make this entry the default "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-to Provider."  S DIR("A")="Is this the default "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-To Provider"  S DIR(0)="YO"  S DIR("B")="YES" I $$GETDFLT(IBTCFLAG),'$$ISDFLT(IEN,IBTCFLAG) S DIR("B")="NO"  D ^DIR I Y K DA S DIE="^IBE(350.9,",DA=1,DR=$S(IBTCFLAG:"11.04",1:"11.03")\_"////"\_IEN D ^DIE  D CLEAN^VALM10,INIT(IBTCFLAG)  Q  ; SET(IBLN,IBSTR) ; add a line to display list  ; returns line number added  S IBLN=IBLN+1 D SET^VALM10(IBLN,IBSTR)  Q IBLN  ; ISDFLT(PIEN,IBTCFLAG) ; returns 1 if provider with ien PIEN is the default pay-to provider, 0 otherwise  Q:PIEN="" 0  Q $$GETDFLT(IBTCFLAG)=PIEN  ; GETDFLT(IBTCFLAG) ; returns ien of default pay-to provider  Q $P($G(^IBE(350.9,1,11)),U,$S(IBTCFLAG:4,1:3))  ; SEL(IBTCFLAG) ; select pay-to provider  ; returns ien of selected pay-to provider, or 0 if nothing is selected  N DIR,IEN,MAX,X,Y  S IEN=0  I VALMLST>4 D  . ; there is at least one entry  . S MAX=$O(@VALMAR@("ZIDX",""),-1) S:MAX=1 Y=1  . I MAX>1 D  . . ;/IB\*2.0\*608 – vd (US2599) Changed TRICARE to Non-MCCF.  . . S DIR("A")="Select "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-To Provider (1-"\_MAX\_"): "  . . S DIR(0)="NA^"\_1\_":"\_MAX\_":0"  . . D ^DIR  . . Q  . S:+Y>0 IEN=$O(@VALMAR@("ZIDX",Y,""))  . Q  Q +IEN ; | | | | | | | | | |

* Changed all of the display labels and prompts from “TRICARE” to “Non-MCCF” in the routine IBJPS4:

| **Routines** | **Activities** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Routine Name** | IBJPS4 | | | | | | | | |
| **Enhancement Category** | New | | Modify | Delete | | | No Change | | |
| **RTM** |  | | | | | | | | |
| **Related Options** | None | | | | | | | | |
| **Related Routines** | **Routines “Called By”** | | | | | **Routines “Called”** | | | |
|  |  | | | | |  | | | |
| **Data Dictionary (DD) References** | None | | | | | | | | |
| **Related Protocols** | None | | | | | | | | |
| **Related Integration Control Registrations (ICRs)** | None | | | | | | | | |
| **Data Passing** | Input | Output Reference | | | Both | | | Global Reference | Local |
| **Input Attribute Name and Definition** | Name:  Definition: | | | | | | | | |
| **Output Attribute Name and Definition** | Name:  Definition: | | | | | | | | |
| **Current Logic** | | | | | | | | | |
| IBJPS4 ;BP/YMG - IB Site Parameters, Pay-To Provider Associations ;06-Nov-2008  ;;2.0;INTEGRATED BILLING;\*\*400,516\*\*;21-MAR-94;Build 123  ;;Per VA Directive 6402, this routine should not be modified.  ;  ; MRD;IB\*2.0\*516 - Added logic pertaining to TRICARE-Specific Pay-To  ; Providers, which entailed adding the parameter IBTCFLAG to many  ; procedures here and in ^IBJPS3.  ; EN(IBTCFLAG) ; -- main entry point for IBJP IB PAY-TO ASSOCIATIONS  ; select pay-to provider  D EN^VALM("IBJP IB "\_$S(IBTCFLAG:"TRICARE PAY-TO ASSOCS",1:"PAY-TO ASSOCIATIONS"))  S VALMBCK="R"  Q  ; HDR ; -- header code  S VALMHDR(1)=""  Q  ; INIT(IBTCFLAG) ; -- init variables and list array  N DFLT,HASDIVS,IBCNT,IBLN,IBSTR,IEN4,PIEN,PROVS  S DFLT=$$GETDFLT^IBJPS3(IBTCFLAG) D BLD(DFLT,.PROVS,IBTCFLAG)  I $D(PROVS) D  .; create listman array  .S (IBCNT,IBLN)=0 S PIEN="" F  S PIEN=$O(PROVS(PIEN)) Q:PIEN=""  D  ..S IBLN=IBLN+1  ..S IBSTR=$$SETSTR^VALM1(PROVS(PIEN)\_$S($$ISDFLT^IBJPS3(PIEN,IBTCFLAG):" (Default)",1:""),"",2,75)  ..D SET^VALM10(IBLN,IBSTR)  ..S HASDIVS=0,IEN4="" F  S IEN4=$O(PROVS(PIEN,IEN4)) Q:IEN4=""  D  ...S IBLN=IBLN+1,IBCNT=IBCNT+1 S:'HASDIVS HASDIVS=1  ...S IBSTR=$$SETSTR^VALM1(IBCNT,"",8,4)  ...S IBSTR=$$SETSTR^VALM1($P(PROVS(PIEN,IEN4),U,2),IBSTR,14,8)  ...S IBSTR=$$SETSTR^VALM1($P(PROVS(PIEN,IEN4),U),IBSTR,24,55)  ...D SET^VALM10(IBLN,IBSTR)  ...S @VALMAR@("ZIDX",IBCNT,IEN4)=""  ...Q  ..I 'HASDIVS S IBSTR=$$SETSTR^VALM1("No Divisions found.","",8,45) S IBLN=IBLN+1 D SET^VALM10(IBLN,IBSTR)  ..S IBLN=IBLN+1 D SET^VALM10(IBLN,"")  ..Q  .Q  I 'DFLT S IBLN=$$SET^IBJPS3(0,$$SETSTR^VALM1("No Default "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-To Provider found.","",11,42))  I DFLT,'$D(PROVS) S IBLN=$$SET^IBJPS3(0,$$SETSTR^VALM1("No "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-To Providers found.","",15,35))  S VALMCNT=IBLN,VALMBG=1  Q ;        ; DIVADD(IBTCFLAG) ; associate division with a pay-to provider  N DA,DFLT,DIC,DIE,DIEN,DIR,DNAME,DR,IEN4,IEN19,Y,IBNODE  S IBNODE=$$NODE(IBTCFLAG)  ;  D FULL^VALM1  S VALMBCK="R"  S IEN4=$$SEL I IEN4>0 D  .S IEN19=$O(^IBE(350.9,1,IBNODE,"B",IEN4,"")) I IEN19="" D  ..; create a new entry in 350.9  ..S DIEN=$$FIND1^DIC(40.8,,"QX",IEN4,"AD") I 'DIEN Q  ..S DNAME=$$GET1^DIQ(40.8,DIEN,.01),DFLT=$$GETDFLT^IBJPS3(IBTCFLAG) I 'DFLT Q  ..I IEN4=+$G(^IBE(350.9,1,IBNODE,DFLT,0)) D ERR Q  ..S DIC="^IBE(350.9,1,"\_IBNODE\_",",DIC(0)="L",DIC("DR")=".02////"\_DNAME\_";.05////"\_DFLT,X=IEN4,DLAYGO=350.9,DA(1)=1  ..K DD,DO D FILE^DICN I +Y>0 S IEN19=+Y  ..K DIC,DD,DO,DLAYGO  ..Q  .I +IEN19>0 D  ..I $P($G(^IBE(350.9,1,IBNODE,IEN19,0)),U,5)="" D ERR Q  ..S DIR(0)="P^IBE(350.9,1,"\_IBNODE\_",:M",DIR("S")="I $P(^(0),U,5)="""""  ..S DA(1)=1,DIR("A")="Select "\_$S(IBTCFLAG:"TRICARE ",1:"")\_"Pay-To Provider"  ..D ^DIR  ..I +Y>0 S DIE="^IBE(350.9,1,"\_IBNODE\_",",DA=IEN19,DA(1)=1,DR=".05////"\_+Y D ^DIE  .Q  D CLEAN^VALM10,CLEAN^DILF,INIT(IBTCFLAG)  Q  ; ERR ;  N DIR  S DIR("A",1)="A division used as a Pay-to Provider cannot be associated"  S DIR("A",2)="with another Pay-to Provider."  S DIR("A")="Press RETURN to continue: "  S DIR(0)="EA" D ^DIR  Q  ; GETPROV(PIEN,IBTCFLAG) ; return pay-to provider ien for a given division, or 0 if provider can't be found  ; PIEN has to be a valid ien in pay-to providers sub-file  ;  N PRVZ,NXTPIEN,OUT,IBNODE  S PRVZ(PIEN)="" ; this array holds ien's to prevent infinite chain  S IBNODE=$$NODE(IBTCFLAG)  S OUT=0 F  S NXTPIEN=+$P($G(^IBE(350.9,1,IBNODE,PIEN,0)),U,5) D  Q:OUT  ;  .I 'NXTPIEN S OUT=1 Q  ; no parent - this is pay-to provider  .I $D(PRVZ(NXTPIEN)) S PIEN=0,OUT=1 Q  ; we are in an infinite loop, so get out  .S PIEN=NXTPIEN,PRVZ(NXTPIEN)="" ; parent exists, so continue the loop  .Q  Q PIEN  ; GETDIVS(PIEN,DIVS,IBTCFLAG) ; return array of divisions associated with pay-to provider PIEN  N I,DIV,PPROV,IBNODE  S IBNODE=$$NODE(IBTCFLAG)  S I="" F  S I=$O(^IBE(350.9,1,IBNODE,"B",I)) Q:I=""  D  .S DIV=$O(^IBE(350.9,1,IBNODE,"B",I,""))  .Q:+DIV'>0 S PPROV=$$GETPROV(DIV,IBTCFLAG)  .I PPROV=PIEN,DIV'=PIEN S DIVS(DIV)=$P($G(^IBE(350.9,1,IBNODE,DIV,0)),U,2)  .Q  Q  ; NODE(IBTCFLAG) ; Determine appropriate pay-to provide node within ^IBE(350.9).  ; '29' for TRICARE, otherwise '19'.  Q $S(IBTCFLAG:29,1:19)  ; SCRN4(IEN) ; Screen for INSTITUTION(#4) file  N DIERR,IENS,FIELDS,Z,ZERR  S IENS=+IEN\_",",FIELDS="11;13;101"  D GETS^DIQ(4,IENS,FIELDS,"IE","Z","ZERR")  I $D(DIERR) Q 0  ;Check to see if National  I Z(4,IENS,11,"I")'="N" Q 0  ;Check to see if Inactive  I Z(4,IENS,101,"I") Q 0  ;Check to see if Pharmacy  I "^PHARM^CMOP^MSN^"[(U\_Z(4,IENS,13,"E")\_U) Q 0  ;Default  Q 1  ; TRICARE(IBIFN) ; Determine whether this bill/claim is TRICARE or not.  ; Return '1' if TRICARE, '0' if not. There are two rate types that  ; should return '1': TRICARE and TRICARE REIMB. INS.  ;  I '$G(IBIFN) Q 0  N IBRATE  S IBRATE=$P(^DGCR(399,IBIFN,0),U,7)  I 'IBRATE Q 0  I $P($G(^DGCR(399.3,IBRATE,0)),U)'["TRICARE" Q 0  ;  ; At this point, the claim has a rate type of TRICARE or TRICARE  ; REIMB. INS. However, quit with a '1' only if a default TRICARE-  ; specific pay-to provider is defined. Otherwise, quit with a '0'.  ;  I $$GETDFLT^IBJPS3(1) Q 1  Q 0 | | | | | | | | | |
| **Modified Logic (Changes are in bold)** | | | | | | | | | |
| IBJPS4 ;BP/YMG - IB Site Parameters, Pay-To Provider Associations ;06-Nov-2008  ;;2.0;INTEGRATED BILLING;\*\*400,516,608\*\*;21-MAR-94;Build 123  ;;Per VA Directive 6402, this routine should not be modified.  ;  ; MRD;IB\*2.0\*516 - Added logic pertaining to TRICARE-Specific Pay-To  ; Providers, which entailed adding the parameter IBTCFLAG to many  ; procedures here and in ^IBJPS3.  ; EN(IBTCFLAG) ; -- main entry point for IBJP IB PAY-TO ASSOCIATIONS  ; select pay-to provider  D EN^VALM("IBJP IB "\_$S(IBTCFLAG:"TRICARE PAY-TO ASSOCS",1:"PAY-TO ASSOCIATIONS"))  S VALMBCK="R"  Q  ; HDR ; -- header code  S VALMHDR(1)=""  Q  ; INIT(IBTCFLAG) ; -- init variables and list array  N DFLT,HASDIVS,IBCNT,IBLN,IBSTR,IEN4,PIEN,PROVS  S DFLT=$$GETDFLT^IBJPS3(IBTCFLAG) D BLD(DFLT,.PROVS,IBTCFLAG)  I $D(PROVS) D  .; create listman array  .S (IBCNT,IBLN)=0 S PIEN="" F  S PIEN=$O(PROVS(PIEN)) Q:PIEN=""  D  ..S IBLN=IBLN+1  ..S IBSTR=$$SETSTR^VALM1(PROVS(PIEN)\_$S($$ISDFLT^IBJPS3(PIEN,IBTCFLAG):" (Default)",1:""),"",2,75)  ..D SET^VALM10(IBLN,IBSTR)  ..S HASDIVS=0,IEN4="" F  S IEN4=$O(PROVS(PIEN,IEN4)) Q:IEN4=""  D  ...S IBLN=IBLN+1,IBCNT=IBCNT+1 S:'HASDIVS HASDIVS=1  ...S IBSTR=$$SETSTR^VALM1(IBCNT,"",8,4)  ...S IBSTR=$$SETSTR^VALM1($P(PROVS(PIEN,IEN4),U,2),IBSTR,14,8)  ...S IBSTR=$$SETSTR^VALM1($P(PROVS(PIEN,IEN4),U),IBSTR,24,55)  ...D SET^VALM10(IBLN,IBSTR)  ...S @VALMAR@("ZIDX",IBCNT,IEN4)=""  ...Q  ..I 'HASDIVS S IBSTR=$$SETSTR^VALM1("No Divisions found.","",8,45) S IBLN=IBLN+1 D SET^VALM10(IBLN,IBSTR)  ..S IBLN=IBLN+1 D SET^VALM10(IBLN,"")  ..Q  .Q  I 'DFLT S IBLN=$$SET^IBJPS3(0,$$SETSTR^VALM1("No Default "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-To Provider found.","",11,42))  I DFLT,'$D(PROVS) S IBLN=$$SET^IBJPS3(0,$$SETSTR^VALM1("No "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-To Providers found.","",15,35))  S VALMCNT=IBLN,VALMBG=1  Q ;        ; DIVADD(IBTCFLAG) ; associate division with a pay-to provider  N DA,DFLT,DIC,DIE,DIEN,DIR,DNAME,DR,IEN4,IEN19,Y,IBNODE  S IBNODE=$$NODE(IBTCFLAG)  ;  D FULL^VALM1  S VALMBCK="R"  S IEN4=$$SEL I IEN4>0 D  .S IEN19=$O(^IBE(350.9,1,IBNODE,"B",IEN4,"")) I IEN19="" D  ..; create a new entry in 350.9  ..S DIEN=$$FIND1^DIC(40.8,,"QX",IEN4,"AD") I 'DIEN Q  ..S DNAME=$$GET1^DIQ(40.8,DIEN,.01),DFLT=$$GETDFLT^IBJPS3(IBTCFLAG) I 'DFLT Q  ..I IEN4=+$G(^IBE(350.9,1,IBNODE,DFLT,0)) D ERR Q  ..S DIC="^IBE(350.9,1,"\_IBNODE\_",",DIC(0)="L",DIC("DR")=".02////"\_DNAME\_";.05////"\_DFLT,X=IEN4,DLAYGO=350.9,DA(1)=1  ..K DD,DO D FILE^DICN I +Y>0 S IEN19=+Y  ..K DIC,DD,DO,DLAYGO  ..Q  .I +IEN19>0 D  ..I $P($G(^IBE(350.9,1,IBNODE,IEN19,0)),U,5)="" D ERR Q  ..S DIR(0)="P^IBE(350.9,1,"\_IBNODE\_",:M",DIR("S")="I $P(^(0),U,5)="""""  ..S DA(1)=1,DIR("A")="Select "\_$S(IBTCFLAG:"Non-MCCF ",1:"")\_"Pay-To Provider"  ..D ^DIR  ..I +Y>0 S DIE="^IBE(350.9,1,"\_IBNODE\_",",DA=IEN19,DA(1)=1,DR=".05////"\_+Y D ^DIE  .Q  D CLEAN^VALM10,CLEAN^DILF,INIT(IBTCFLAG)  Q  ; ERR ;  N DIR  S DIR("A",1)="A division used as a Pay-to Provider cannot be associated"  S DIR("A",2)="with another Pay-to Provider."  S DIR("A")="Press RETURN to continue: "  S DIR(0)="EA" D ^DIR  Q  ; GETPROV(PIEN,IBTCFLAG) ; return pay-to provider ien for a given division, or 0 if provider can't be found  ; PIEN has to be a valid ien in pay-to providers sub-file  ;  N PRVZ,NXTPIEN,OUT,IBNODE  S PRVZ(PIEN)="" ; this array holds ien's to prevent infinite chain  S IBNODE=$$NODE(IBTCFLAG)  S OUT=0 F  S NXTPIEN=+$P($G(^IBE(350.9,1,IBNODE,PIEN,0)),U,5) D  Q:OUT  ;  .I 'NXTPIEN S OUT=1 Q  ; no parent - this is pay-to provider  .I $D(PRVZ(NXTPIEN)) S PIEN=0,OUT=1 Q  ; we are in an infinite loop, so get out  .S PIEN=NXTPIEN,PRVZ(NXTPIEN)="" ; parent exists, so continue the loop  .Q  Q PIEN  ; GETDIVS(PIEN,DIVS,IBTCFLAG) ; return array of divisions associated with pay-to provider PIEN  N I,DIV,PPROV,IBNODE  S IBNODE=$$NODE(IBTCFLAG)  S I="" F  S I=$O(^IBE(350.9,1,IBNODE,"B",I)) Q:I=""  D  .S DIV=$O(^IBE(350.9,1,IBNODE,"B",I,""))  .Q:+DIV'>0 S PPROV=$$GETPROV(DIV,IBTCFLAG)  .I PPROV=PIEN,DIV'=PIEN S DIVS(DIV)=$P($G(^IBE(350.9,1,IBNODE,DIV,0)),U,2)  .Q  Q  ; NODE(IBTCFLAG) ; Determine appropriate pay-to provide node within ^IBE(350.9).  ; '29' for TRICARE, otherwise '19'.  Q $S(IBTCFLAG:29,1:19)  ; SCRN4(IEN) ; Screen for INSTITUTION(#4) file  N DIERR,IENS,FIELDS,Z,ZERR  S IENS=+IEN\_",",FIELDS="11;13;101"  D GETS^DIQ(4,IENS,FIELDS,"IE","Z","ZERR")  I $D(DIERR) Q 0  ;Check to see if National  I Z(4,IENS,11,"I")'="N" Q 0  ;Check to see if Inactive  I Z(4,IENS,101,"I") Q 0  ;Check to see if Pharmacy  I "^PHARM^CMOP^MSN^"[(U\_Z(4,IENS,13,"E")\_U) Q 0  ;Default  Q 1  ; TRICARE(IBIFN) ; Determine whether this bill/claim is TRICARE or not.  ; Return '1' if TRICARE, '0' if not. There are two rate types that  ; should return '1': TRICARE and TRICARE REIMB. INS.  ;   ; This has been modified to reflect Non-MCCF Claims and not just TRICARE. - IB\*2.0\*608 - vd (US2599)  ;  I '$G(IBIFN) Q 0  N IBRATE  S IBRATE=$P(^DGCR(399,IBIFN,0),U,7)  I 'IBRATE Q 0  ;  ;/Begin IB\*2.0\*608 - vd (US2599) - Replaced the following lines  ; I $P($G(^DGCR(399.3,IBRATE,0)),U)'["TRICARE" Q 0  I '$D(^IBE(350.9,1,28,”B”,IBRATE)) Q 0 ; Not a Non-MCCF Pay-to Provider Rate Type.  ;/End IB\*2.0\*508 - vd  ;  ; At this point, the claim has a Non-MCCF rate type. However,  ; quit with a '1' only if a default Non-MCCF-specific pay-to  ; provider is defined. Otherwise, quit with a '0'.  ;  I $$GETDFLT^IBJPS3(1) Q 1  Q 0 | | | | | | | | | |

* Created the routine IBJPS7 to handle the adding and removing of Rate Types for the new List Template, "IBJP IB NON-MCCF RATE TYPES”:

| **Routines** | **Activities** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Routine Name** | IBJPS7 | | | | | | | | |
| **Enhancement Category** | New | | Modify | Delete | | | No Change | | |
| **RTM** |  | | | | | | | | |
| **Related Options** | None | | | | | | | | |
| **Related Routines** | **Routines “Called By”** | | | | | **Routines “Called”** | | | |
|  |  | | | | |  | | | |
| **Data Dictionary (DD) References** | None | | | | | | | | |
| **Related Protocols** | None | | | | | | | | |
| **Related Integration Control Registrations (ICRs)** | None | | | | | | | | |
| **Data Passing** | Input | Output Reference | | | Both | | | Global Reference | Local |
| **Input Attribute Name and Definition** | Name:  Definition: | | | | | | | | |
| **Output Attribute Name and Definition** | Name:  Definition: | | | | | | | | |
| **Current Logic** | | | | | | | | | |
| N/A | | | | | | | | | |
| **Modified Logic (Changes are in bold)** | | | | | | | | | |
| IBJPS7 ;ALB/VD - IB Site Parameters, Pay-To Provider Rate Types ;06-Nov-2008  ;;2.0;INTEGRATED BILLING;\*\*608\*\*;21-MAR-94;Build 123  ;;Per VA Directive 6402, this routine should not be modified.  ; EN(IBTCFLAG) ; -- main entry point for IBJP IB PAY-TO RATE TYPES  ; select pay-to provider  Q:(IBTCFLAG'=1) ; Only want Non-MCCF Pay-To Provider Rate Types  D EN^VALM("IBJP IB NON-MCCF RATE TYPES")  S VALMBCK="R"  Q  ; HDR ; -- header code  S VALMSG=""  Q  ; INIT(IBTCFLAG) ; -- init variables and list array  N ERROR,IBCNT,IBLN,IBSTR,RTYDATA,RIENS,RTYPE  Q:(IBTCFLAG'=1) ; Only want Non-MCCF Pay-To Provider Rate Types  ;  S (VALMCNT,IBCNT,IBLN)=0  I $D(^IBE(350.9,1,28,"B")) D  . S RTYPE=0 F  S RTYPE=$O(^IBE(350.9,1,28,"B",RTYPE)) Q:'RTYPE  D  . . ;  . . S RIENS=RTYPE\_","  . . D GETS^DIQ(399.3,RIENS,".001;.01;.03","I","RTYDATA","ERROR")  . . ; do not included \*RESERVED codes (must be ACTIVATE = 0 for Active, 1 = InActive)  . . Q:+$G(RTYDATA(399.3,RIENS,.03,"I"))  . . S IBCNT=IBCNT+1  . . S IBSTR=$$SETSTR^VALM1($J(IBCNT,4)\_".","",2,6)  . . S IBSTR=$$SETSTR^VALM1($J($G(RTYDATA(399.3,RIENS,.001,"I")),3),IBSTR,10,4)  . . S IBSTR=$$SETSTR^VALM1($G(RTYDATA(399.3,RIENS,.01,"I")),IBSTR,17,30)  . . S IBLN=$$SET(IBLN,IBSTR)  . . S @VALMAR@("ZIDX",IBCNT,$G(RTYDATA(399.3,RIENS,.001,"I")))=""  . . Q  ;  I 'IBLN S IBLN=$$SET(IBLN,$$SETSTR^VALM1("No Rate Types defined.","",13,40))  ;  S VALMCNT=IBLN,VALMBG=1  Q  ; HELP ; -- help code  S X="?" D DISP^XQORM1 W !!  Q  ; EXIT ; -- exit code  D CLEAR^VALM1,CLEAN^VALM10  Q  ; RTADD(IBTCFLAG) ; -- Add a new Rate Type  N X,Y,DIE,DR,DIR,DIRUT,DUOUT,DTOUT,ERRMSG,FDA,RETIEN  ;  S VALMBCK="R"  D FULL^VALM1  D RTADD1,INIT(IBTCFLAG)  Q  ; RTADD1 ; Looping tag for Adding Rate Types  K FDA,RETIEN,ERRMSG,X  ;  S DIR(0)="350.928,.01"  S DIR("A")="Rate Type"  D ^DIR  Q:'Y  ;  I $D(^IBE(350.9,1,28,"B",+Y)) D  G RTADD1  . D FULL^VALM1  . W @IOF  . W !,"This Rate Type already exists on the Exclusion list."  . W !,"Please enter another Rate Type."  . Q  ;  S FDA(350.928,"+1,1,",.01)=+Y  D UPDATE^DIE("","FDA","RETIEN","ERRMSG")  G RTADD1  ; RTDEL(IBTCFLAG) ; -- Delete a Rate Type  N DR  D RTDEL1  S VALMBCK="R"  Q  ; RTDEL1 ; Looping tag for deleting Rate Types  N Z,VALMY  D FULL^VALM1  D EN^VALM2($G(XQORNOD(0)))  S Z=0  F  S Z=$O(VALMY(Z)) Q:'Z  D  . N DIK,IEN,RIEN  . S IEN=$O(@VALMAR@("ZIDX",Z,""))  . Q:'IEN  . S RIEN=$O(^IBE(350.9,1,28,"B",IEN,""))  . I +RIEN S DIK="^IBE(350.9,1,28,",DA(1)=1,DA=RIEN D ^DIK  K @VALMAR  D INIT(IBTCFLAG)  Q  ; SET(IBLN,IBSTR) ; -- Add a line to display list  ; returns line number added  S IBLN=IBLN+1 D SET^VALM10(IBLN,IBSTR,IBLN)  Q IBLN  ; | | | | | | | | | |

3) LIST TEMPLATES:

* + IBJP IB TRICARE PAY-TO PROVS (modified):

| **List Template** | **Activities** |
| --- | --- |
| **Name** | IBJP IB TRICARE PAY-TO PROVS |
| **Current Definition:** | |
| **List Manager Workbench** Mar 06, 2018@14:57:07 Page: 1 of 3  Template: IBJP IB TRICARE PAY-TO PROVS    Demographics List Region  Template Name: IBJP IB TRICARE PAY-TO PROVS Top Margin: 2  Entity Name: IB TRICARE Pay-To Providers Bottom " : 18  Screen Title: TRICARE Pay-To Providers Right " : 80    Protocol Information Other Fields  Type of List: PROTOCOL OK to Transport?: OK  Protocol Menu: IBJP IB TRICARE PAY-TO PROV Use Cursor Control: YES  Print Protocol: Allowable Number of Actions: 1  Hidden Menu: VALM HIDDEN ACTIONS Date Range Limit:  Automatic Defaults: YES    + Enter ?? for more actions >>>  DE Demographic Edit MC MUMPS Code Edit PE Protocol Edit  PI Protocol Information CE Caption Edit RN Run List  LR List Region Edit CL Change List Template IT Input Template  OF Other Fields EA Edit All RO Routine Editor  Select Tool:Next Screen// | |
| **Modified Definition (Changes are highlighted):** | |
| **List Manager Workbench** Mar 06, 2018@15:01:37 Page: 1 of 3  Template: IBJP IB TRICARE PAY-TO PROVS    Demographics List Region  Template Name: IBJP IB TRICARE PAY-TO PROVS Top Margin: 2  Entity Name: IB Non-MCCF Pay-To Providers Bottom " : 18  Screen Title: Non-MCCF Pay-To Providers Right " : 80    Protocol Information Other Fields  Type of List: PROTOCOL OK to Transport?: OK  Protocol Menu: IBJP IB NON-MCCF PAY-TO PRO Use Cursor Control: YES  Print Protocol: Allowable Number of Actions: 1  Hidden Menu: VALM HIDDEN ACTIONS Date Range Limit:  Automatic Defaults: YES    + Enter ?? for more actions >>>  DE Demographic Edit MC MUMPS Code Edit PE Protocol Edit  PI Protocol Information CE Caption Edit RN Run List  LR List Region Edit CL Change List Template IT Input Template  OF Other Fields EA Edit All RO Routine Editor  Select Tool:Next Screen// | |

* + IBJP IB NON-MCCF RATE TYPES (new):

| **List Template** | **Activities** |
| --- | --- |
| **Name** | IBJP IB NON-MCCF RATE TYPES |
| **Current Definition:** | |
| N/A | |
| **Modified Definition (Changes are highlighted):** | |
| List Manager Workbench Mar 06, 2018@15:06:38 Page: 1 of 3  Template: IBJP IB NON-MCCF RATE TYPES    Demographics List Region  Template Name: IBJP IB NON-MCCF RATE TYPES Top Margin: 4  Entity Name: Non-MCCF Rate Types Bottom " : 19  Screen Title: Non-MCCF Rate Types Right " : 80    Protocol Information Other Fields  Type of List: PROTOCOL OK to Transport?: OK  Protocol Menu: IBJP IB NON-MCCF RATE TYPES Use Cursor Control: YES  Print Protocol: Allowable Number of Actions: 1  Hidden Menu: VALM HIDDEN ACTIONS Date Range Limit:  Automatic Defaults: YES    + Enter ?? for more actions >>>  DE Demographic Edit MC MUMPS Code Edit PE Protocol Edit  PI Protocol Information CE Caption Edit RN Run List  LR List Region Edit CL Change List Template IT Input Template  OF Other Fields EA Edit All RO Routine Editor  Select Tool:Next Screen//  List Manager Workbench Mar 06, 2018@15:09:51 Page: 2 of 3  Template: IBJP IB NON-MCCF RATE TYPES  +    MUMPS Code Related  Header: D HDR^IBJPS7  Entry: D INIT^IBJPS7(1)  Exit: D EXIT^IBJPS7  Expand:  Help: D HELP^IBJPS7  Array: ^TMP("IBJPS7",$J)    Caption Line Information  Name Column Width Display Text Video Scroll Lock  NBR 5 1 # NO  RTYP 10 3 RTY NO  DESCR 17 30 DESCRIPTION NO  + Enter ?? for more actions >>>  DE Demographic Edit MC MUMPS Code Edit PE Protocol Edit  PI Protocol Information CE Caption Edit RN Run List  LR List Region Edit CL Change List Template IT Input Template  OF Other Fields EA Edit All RO Routine Editor  Select Tool:Next Screen// | |

4) PROTOCOL:

* + IBJP IB NON-MCCF RATE TYPE ADD (new):

| **Protocol** | **Activities** |
| --- | --- |
| **Name** | IBJP IB NON-MCCF RATE TYPE ADD |
| **Current Definition:** | |
| N/A | |
| **Modified Definition (Changes are highlighted):** | |
| NAME: IBJP IB NON-MCCF RATE TYPE ADD ITEM TEXT: Add Rate Type  TYPE: action CREATOR: PII  PACKAGE: INTEGRATED BILLING IDENTIFIER: AR  ENTRY ACTION: D RTADD^IBJPS7(1) TIMESTAMP: 64692,55344 | |

* + IBJP IB NON-MCCF RATE TYPE DEL (new):

| **Protocol** | **Activities** |
| --- | --- |
| **Name** | IBJP IB NON-MCCF RATE TYPE DEL |
| **Current Definition:** | |
| N/A | |
| **Modified Definition (Changes are highlighted):** | |
| NAME: IBJP IB NON-MCCF RATE TYPE DEL ITEM TEXT: Remove Rate Type  TYPE: action CREATOR: PII  PACKAGE: INTEGRATED BILLING IDENTIFIER: RR  ENTRY ACTION: D RTDEL^IBJPS7(1) TIMESTAMP: 64692,55385 | |

* + IBJP IB NON-MCCF RATE TYPES (new):

| **Protocol** | **Activities** |
| --- | --- |
| **Name** | IBJP IB NON-MCCF RATE TYPES |
| **Current Definition:** | |
| N/A | |
| **Modified Definition (Changes are highlighted):** | |
| NAME: IBJP IB NON-MCCF RATE TYPES ITEM TEXT: Rate Types  TYPE: action CREATOR: PII  PACKAGE: INTEGRATED BILLING IDENTIFIER: RT  ENTRY ACTION: D EN^IBJPS7(1) TIMESTAMP: 64701,43038 | |

* + IBJP IB NON-MCCF RATE TYPES MENU (new):

| **Protocol** | **Activities** |
| --- | --- |
| **Name** | IBJP IB NON-MCCF RATE TYPES MENU |
| **Current Definition:** | |
| N/A | |
| **Modified Definition (Changes are highlighted):** | |
| NAME: IBJP IB NON-MCCF RATE TYPES MENU ITEM TEXT: Non-MCCF Rate Types Menu  TYPE: menu CREATOR: PII  PACKAGE: INTEGRATED BILLING COLUMN WIDTH: 26  MNEMONIC WIDTH: 4 IDENTIFIER: RM  ITEM: IBJP IB NON-MCCF RATE TYPE ADD MNEMONIC: AR  SEQUENCE: 2  ITEM: IBJP IB NON-MCCF RATE TYPE DEL MNEMONIC: RR  SEQUENCE: 5  HEADER: D SHOW^VALM TIMESTAMP: 64692,55430 | |

* + IBJP IB NON-MCCF PAY-TO PROVIDERS MENU (new):

| **Protocol** | **Activities** |
| --- | --- |
| **Name** | IBJP IB NON-MCCF PAY-TO PROVIDERS MENU |
| **Current Definition:** | |
| N/A | |
| **Modified Definition (Changes are highlighted):** | |
| NAME: IBJP IB NON-MCCF PAY-TO PROVIDERS MENU  ITEM TEXT: Non-MCCF Pay-To Providers Menu  TYPE: menu CREATOR: PII  PACKAGE: INTEGRATED BILLING COLUMN WIDTH: 26  MNEMONIC WIDTH: 4  ITEM: IBJP IB TRICARE PAY-TO PROVIDER ADD  MNEMONIC: AP SEQUENCE: 2  ITEM: IBJP IB TRICARE PAY-TO PROVIDER DEL  MNEMONIC: DP SEQUENCE: 6  ITEM: IBJP IB TRICARE PAY-TO PROVIDER EDIT  MNEMONIC: EP SEQUENCE: 4  ITEM: IBJP IB TRICARE PAY-TO PROVIDER DIVISIONS  MNEMONIC: AS SEQUENCE: 8  ITEM: IBJP IB NON-MCCF RATE TYPES MNEMONIC: RT  SEQUENCE: 10  SCREEN: I $D(^XUSEC("IB EDIT PAY-TO TC",DUZ))  HEADER: D SHOW^VALM TIMESTAMP: 64707,34819 | |

* + IBJP IB TRICARE PAY-TO PROVIDERS MENU (deleted):

| **Protocol** | **Activities** |
| --- | --- |
| **Name** | IBJP IB TRICARE PAY-TO PROVIDERS MENU |
| **Current Definition:** | |
| NAME: IBJP IB TRICARE PAY-TO PROVIDERS MENU  ITEM TEXT: TRICARE Pay-To Providers Menu  TYPE: menu CREATOR: PII  PACKAGE: INTEGRATED BILLING  COLUMN WIDTH: 26 MNEMONIC WIDTH: 4  ITEM: IBJP IB TRICARE PAY-TO PROVIDER ADD  MNEMONIC: AP SEQUENCE: 2  ITEM: IBJP IB TRICARE PAY-TO PROVIDER DEL  MNEMONIC: DP SEQUENCE: 6  ITEM: IBJP IB TRICARE PAY-TO PROVIDER EDIT  MNEMONIC: EP SEQUENCE: 4  ITEM: IBJP IB TRICARE PAY-TO PROVIDER DIVISIONS  MNEMONIC: AS SEQUENCE: 8  SCREEN: I $D(^XUSEC("IB EDIT PAY-TO TC",DUZ))  HEADER: D SHOW^VALM TIMESTAMP: 63699,49121 | |
| **Modified Definition (Changes are highlighted):** | |
| Deleted | |