**161239: CAS\_MPDU\_TC\_ 1.0.1.03 | Kernel key allocation to honor key delegation**



Creation Date: Jan 9, 2018 2:06:05 PM (UTC-06:00) Last Modified: Mar 26, 2019 3:30:37 PM (UTC-05:00) State: Approved

Originator: Girla, Samatha (Government CIO) Owner: Henderson, John (AbleVets LLC)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_ 1.0.1.03 | Kernel key allocation to honor key delegation

Description: As a user who is not a licensed pharmacist but is responsible for assigning permissions for the PSDRPH Key, I want the ability to manage the permissions for the PSDRPH Key using the XU EPCS PSDRPH Key Allocate/De-Allocate without having the permissions myself so that I am not in violation of VA policies or DEA regulations.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

Must be able to allocate and de-allocate keys

**Notes:**

**All data is for demonstration purposes only and not to taken as actual values**

Expected Results

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

Scenario 1: The user 1 DELEGATED this key's authority, then the user can assign permissions related to the PSDRPH key without having permission to myself. Note-Verify that User 1 does not hold the PSDRPH key by checking the option “Display User Characteristics” [XUUSERDISP] option before starting the test.

Expected Results

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Log into your local VistA instance with IRM to delegate the key

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Navigate back to the Option prompt.

Expected Results

The “Key Management” option prompt.

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Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

At the Option prompt type “Key Management” and then press Enter..

Expected Results

A list of options is displayed:

Allocation of Security Keys De-allocation of Security Keys Enter/Edit of Security Keys All the Keys a User Needs Allocate/ De-Allocate Exclusive Key(s) Change user's allocated keys to delegated keys Delegate keys Keys For a Given Menu Tree

List users holding a certain key Remove delegated keys Show the keys of a particular user The ‘Select Key Management Option: is displayed.

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Type Delegate Keys at Option and then press Enter.

Expected Results

The ‘Delegate key “prompt is displayed. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Type PSDRPH and then press Enter..

Expected Results

The ‘Another key: prompt is displayed. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘Holder of key: prompt is displayed. Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Type the name of a person. (User 1)

Expected Results

The ‘Another holder: prompt is displayed. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘You are delegating keys. Do you wish to proceed? YES//’ prompt is displayed. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘PSDRPH being delegated to: “name of holder”; prompt is displayed. (User 1) Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Scenario 1 Now user 1have been DELEGATED this key's authority, then user can assign permissions related to the PSDRPH key. Log into your local VistA instance (User 1)

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Navigate to “Allocate/De-Allocate of PSDRPH Key [PSO EPCS PSDRPH KEY]” option to allocate PSDRPH to another user.

Expected Results

Select Outpatient Pharmacy Manager <TEST ACCOUNT> Option: allocate/De-Allocate of PSDRPH Key Enter User Name: Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Type the name of the person you wish to Allocate or De-Allocate the PSDRPH key.

Expected Results

Enter User Name: FirstName, Last Name GXXXXX,POXXXX PG 192 SYSTEM ADMINIST RATOR Allocate PSDRPH for LASTNAME, FIRSTNAME? Y// YES

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Scenario 1: The user 1 who has been DELEGATED PSDRPH key and try to allocate this keys to himself should get the error message

Navigate to “Allocate/De-Allocate of PSDRPH Key [PSO EPCS PSDRPH KEY]” option to allocate PSDRPH to another user. . Expected Results

Select Outpatient Pharmacy Manager <TEST ACCOUNT> Option: allocate/De-Allocate off PSDRPH Key Enter User Name: Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Type the name of the person (User 1) you wish to Allocate or De-Allocate the PSDRPH key.

Expected Results

The Error message ==> Sorry, you can't give yourself keys. See your IRM staff. Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Scenario 2: If user have been ALLOCATED this key's authority (I hold it myself); I can assign permissions related to the PSDRPH key. Navigate back to the Option prompt.

Expected Results

The “Key Management” option prompt. Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

At the Option prompt type “Key Management” and then press Enter.

Expected Results

A list of options is displayed: Allocation of Security Keys De-allocation of Security Keys Enter/Edit of Security Keys All the Keys a User Needs Allocate/De-Allocate Exclusive Key(s) Change user's allocated keys to delegated keys Delegate keys Keys For a Given Menu Tree List users holding a certain key Remove delegated keys Show the keys of a user The ‘Select Key Management Option: is displayed.

Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Type Remove and then press Enter.

Expected Results

The ‘Remove delegated key” prompt is displayed. Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Type PSDRPH and then press Enter.

Expected Results

The ‘Another key: prompt is displayed. Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘Holder of key: prompt is displayed. Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Type the name of a person.

Expected Results

The ‘Another holder: prompt is displayed. Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘You are removing delegated keys. Do you wish to proceed? YES//’ prompt is displayed.

Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘PSDRPH being taken away from: “name of holder”; prompt is displayed. Comments

Validates

Attachments

**Step 25**

**Execution Step**

Description\*

Navigate back to the Option prompt and type “Key Management” and then press Enter.

Expected Results

A list of options is displayed: Allocation of Security Keys De-allocation of Security Keys Enter/Edit of Security Keys All the Keys a User Needs Allocate/De-Allocate Exclusive Key(s) Change user's allocated keys to delegated keys Delegate keys Keys For a Given Menu Tree List users holding a certain key Remove delegated keys Show the keys of a particular user The ‘Select Key Management Option: is displayed.

Comments

Validates

Attachments

**Step 26**

**Execution Step**

Description\*

Type Allocation of Security Keys and then press Enter.

Expected Results

The ‘Allocate key’ prompt is displayed. Comments

Validates

Attachments

**Step 27**

**Execution Step**

Description\* Type PSDRPH.

Expected Results

The ‘The PSDRPH key cannot be allocated / de-allocated by this option. Please use the option 'Allocate/De-Allocate of PSDRPH Key': error message is displayed.

Comments

Validates

Attachments

**Step 28**

**Execution Step**

Description\*

Scenario 3: I can assign permissions related to the PSDRPH key if I hold XUMGR key (meaning I have the keys to the VistA Security Key kingdom).

Expected Results

Repeat Listed above steps to verify. Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**162370: CAS\_MPDU\_TS\_ 1.0.1.04 | Orphan PSO EPCS PSDRPH Key**



**Allocate/De-Allocate**

Creation Date: Jan 18, 2018 11:11:42 AM (UTC-06:00) Last Modified: Mar 26, 2019 7:51:49 AM (UTC-05:00) State: Approved

Originator: Girla, Samatha (Government CIO) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_ 1.0.1.04 | Orphan PSO EPCS PSDRPH Key Allocate/De-Allocate

Description: As a user responsible for allocating the Kernel Key “PSDRPH”, I need the XU EPCS PSDRPH Allocate/De-Allocate Key function separated from all other kernel key functions so that we can limit who has access to give or remove this key.

Must have VistA access.

User must hold/ not hold the PSDRPH Key.

Check “DISPLAY USER CHARACTERISTICS XUUSERDISP” option to verify PSDRPH key is listed. System admin should setup the menu options for user to access the functions.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to IOC Test Sites:**

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**Notes:**

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Expected Results

Comments

Validates

Attachments

**Step 2**

**Information Step**

Description\* Scenario 1:

Verify the Allocate/De-Allocate of PSDRPH Key [PSO EPCS PSDRPH KEY] has been moved to its own separate menu

**Step 3**

**Execution Step**

Description\*

Log into your local vista instance.

Expected Results

User will be taken to the access/verify code prompts.. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Navigate to “Option: ePCS DEA Utility Functions” and then press Enter.

Verify that the “Allocate/De-Allocate of PSDRPH Key [PSO EPCS PSDRPH KEY]” option has been removed from this list.

Expected Results

A list of options is displayed.

A list of options is displayed.

1 DEA Expiration Date Report

2 Print Prescribers with Privileges

3 Print DISUSER Prescribers with Privileges

4 Print PSDRPH Key Holders

5 Print Setting Parameters Privileges

6 Print Audits for Prescriber Editing

7 Changes to DEA Prescribing Privileges Report

8 Allocation Audit of PSDRPH Key Report

9 Enter/Edit EPCS Access Reports Parameters

10 Allow VA Number if DEA Number Expired

11 Set Pharmacy Operating Mode

12 Edit Facility DEA# and Expiration Date

The ‘Select ePCS DEA Utility Functions Option’: prompt is displayed.

Comments

Validates

Attachments

**Step 5**

**Information Step**

Description\*

Scenario 2:

Verify the option “Allocate/De-Allocate of PSDRPH Key [PSO EPCS PSDRPH KEY]” displayed in the user’s secondary menu list.

**Step 6**

**Execution Step**

Description\*

Log into your local vista instance

.

Verify that the ‘Allocate/De-Allocate of PSDRPH Key [PSO EPCS PSDRPH KEY]’ option is now in the user’s secondary menu list.

Expected Results

You can also select a secondary option: PSD Allocate/De-Allocate of PSDRPH Key [PSO EPCS PSDRPH KEY] UT ePCS DEA Utility

Functions ... [PSO EPCS UTILITY FUNCTIONS] Select Systems Manager Menu <TEST ACCOUNT> Option:

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\* End of test.

Expected Results

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**193905: CAS\_MPDU\_1.1.2.01 | Create new DEA # File**



Creation Date: Aug 27, 2018 1:47:44 PM (UTC-05:00) Last Modified: Mar 29, 2019 10:28:23 AM (UTC-05:00) State: Draft

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture) Type: Manual

Test Data: Unassigned

Copied From:Create new DEA # File

Copied To:Copy of CAS\_MPDU\_1.1.2.01 | Create new DEA # File

Description: As a VA Pharmacist, I need detailed information for provider DEA numbers stored in VistA so the information can be used to provide security controls related to the prescribing and dispensing of controlled substances in both EPCS and VistA

**Summary**

**Categories**

Function: Unassigned

Test Phase: Integration Test

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

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**\*\*\*All data is for demonstration purposes only and not to taken as actual values.**

**Step 2**

**Information Step**

Description\*

**Scenario:**

As a user of the Electronic Prescriptions for Controlled Substances (EPCS) application (Data Entry for Providers), I need to be able to validate the entry of a DEA number against the Controlled Substance Active database of registrants, so that I can process this in one step without having to use external validation via the DEA database.

**Step 3**

**Execution Step**

Description\*

Log into VistA instance

Expected Results

User will be taken to the access/verify code prompts

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

**From primary menu, navigate to the ‘DATA DICTIONARY UTILITY OPTION’ VA FileMan 22.2 Select OPTION: ??**

**Choose from: 1 ENTER OR EDIT FILE ENTRIES 2 PRINT FILE ENTRIES 3 SEARCH FILE ENTRIES 4 MODIFY FILE ATTRIBUTES 5 INQUIRE TO FILE ENTRIES 6 UTILITY FUNCTIONS 7 OTHER OPTIONS 8 DATA DICTIONARY UTILITIES 9 TRANSFER ENTRIES**

Expected Results

**System will be prompted for ‘DATA DICTIONARY UTILITY OPTION:’**

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

**Type ‘LIST FILE ATTRIBUTES’**

Expected Results

**START WITH What File: DEA NUMBERS//**

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

**At the prompt for ‘Select DEA NUMBERS’, Press Enter**

Expected Results

**START WITH What File: DEA NUMBERS// (1 entry) GO TO What File: DEA NUMBERS//**

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Press <Enter> until all the fields are displayed.

Expected Results

DEVICE: Linux Telnet/SSH STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 1

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU

(VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------

---------------------------------------------- 8991.9,.01 DEA NUMBER 0;1 FREE TEXT (Required) INPUT TRANSFORM: K:'$

$VALN2DEA^XUSER2(X) X MAXIMUM LENGTH: 9 LAST EDITED: JUN 27, 2018 HELP-PROMPT: Enter

the DEA number in the format of 2 letters followed by 7 numbers. DESCRIPTION: This field is used to enter the providers' Drug Enforcement Administration (DEA) number. Enter the DEA number as two upper case letters followed by 7 digits. e.g.

, AA1234567. TECHNICAL DESCR: This is the algorithm for the DEA number checking. STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 2 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON. MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ The first letter for practitioners (physicians, dentists, veterinarians, pharmacies etc.) is either an "A", "B", "F", or "G". The second letter should be the first letter of the practitioner's last name. Sometimes this does not match if the registrant changed their name or the DEA did not get it correct the first time. The check digit algorithm is as follows: AS1234563 1 + 3 + 5 = 9 2 + 4 + 6 = 12 x 2 = 24 9 STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/

17/18 PAGE 3

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU

(VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE --------------------------------

-------------------------- + 24 = 33 The last digit of the total must equal the check digit (the last digit of the DEA number). (33#10)=$E("AS1234563",9) NOTES: XXXX--CAN'T BE ALTERED EXCEPT BY PROGRAMMER CROSS-REFERENCE: 8991.9^B 1)= S ^XTV(8991.9,"B",$E(X,1,30),DA)=""

2)= K ^XTV(8991.9,"B",$E(X,1,30),DA) STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 4 STORED IN

^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ----------------------------------------------------------

8991.9,.02 BUSINESS ACTIVITY CODE 0;2 POINTER TO DEA BUSINESS ACTIVITY CODES FILE (#8991.8) LAST EDITED: OCT 05, 2017 HELP-PROMPT: Enter the Business Activity code given to this DEA Number. DESCRIPTION: This is the business activity code related to this DEA Number. 8991.9,.03 DETOX NUMBER 0;3

FREE TEXT

INPUT TRANSFORM: K:$L(X)>9!($L(X)<9) X STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE

5 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU

(VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------

---------------------------------- MAXIMUM LENGTH: 9 LAST EDITED: OCT 05, 2017 HELP-PROMPT: Enter the detox number associated with this DEA Number. Answer must be 9 characters in length. DESCRIPTION: If the DEA provider has detox privileges, this field will be

populated with a 'VX' or 'XA' followed by the numeric portion of the DEA number.

8991.9,.04 EXPIRATION DATE 0;4 DATE INPUT TRANSFORM: S %DT="EX" D ^%DT S X=Y K:Y<1 X STANDARD DATA DICTIONARY

#8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 6 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT

TITLE LOCATION TYPE ------------------------------------------------------------ LAST EDITED: JUN 27, 2018 HELP- PROMPT: Enter the date this DEA Number expires. DESCRIPTION: This is the date of expiration

for the DEA Number. 8991.9,.05 DEA NUMBER SUFFIX 0;5 FREE TEXT INPUT TRANSFORM: K:$L(X)>4!($L(X)<1)

X MAXIMUM LENGTH: 4 LAST EDITED: OCT 05, 2017 HELP-PROMPT: Enter the DEA suffix for the person associated with this DEA Number.

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 7 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA

NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ DESCRIPTION: This is the suffix related to this DEA Number. 8991.9,.06 USE FOR INPATIENT ORDERS? 0;6

SET '1' FOR YES; '0' FOR NO; LAST EDITED: OCT 05, 2017 HELP-PROMPT: Can this DEA be used for inpatient orders? Answer 'YES' or 'NO'. DESCRIPTION: This field indicates

whether or not this DEA number can be used for inpatient orders. STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 8 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ 8991.9,.07 TYPE 0;7 SET '1' FOR

INSTITUTIONAL; '2' FOR INDIVIDUAL; LAST EDITED: OCT 07, 2017 HELP-PROMPT: Enter the usage type for the DEA. The DEA usage type may be 'Individual', or 'Institutional. DESCRIPTION: This identifies whether the DEA number is an individual DEA number or an Intuitional DEA number.

8991.9,1.1 NAME (PROVIDER OR INSTITUTION) 1;1 FREE TEXT INPUT TRANSFORM: K:$L(X)>40!($L(X)<1) X STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 9 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON. MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ MAXIMUM LENGTH: 40

LAST EDITED: OCT 05, 2017 HELP-PROMPT: Enter the name associated with this DEA Number. Answer must be 1-40 characters in length. DESCRIPTION: This is the name of the facility or person who is associated with this DEA Number. 8991.9,1.2 STREET ADDRESS 1 1;2 FREE TEXT INPUT TRANSFORM: K:$L(X)>40!($L(X)<1) X MAXIMUM LENGTH: 40 STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 10 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA

NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ LAST EDITED: OCT 05, 2017 HELP-PROMPT: Enter street address line 1 for the given person/

institution. Answer must be 1-40 characters in length. DESCRIPTION: This is the first line of the street address of the permanent address of the person or

institution associated with this DEA Number. 8991.9,1.3 STREET ADDRESS 2 1;3 FREE TEXT INPUT TRANSFORM: K:$L(X)>40!($L(X)<1) X STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 11 STORED IN

^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------

------ MAXIMUM LENGTH: 40 LAST EDITED: OCT 05, 2017 HELP-PROMPT: Enter street address line 2 for the given person/institution. Answer must be 1-40 characters in length. DESCRIPTION: This is the second line of the street address of the permanent address of the person or institution associated with this DEA Number. 8991.9,1.4 STREET ADDRESS 3 1;4 FREE TEXT INPUT TRANSFORM: K:$L(X)>40!($L(X)<1) X STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 12 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON. MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ MAXIMUM LENGTH: 40

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter street address line 3 for the given person/institution. Answer must be 1-

40 characters in length. DESCRIPTION: This is the third line of the street address of

the permanent address of the person or institution associated with this DEA Number. 8991.9,1.5 CITY

1;5 FREE TEXT INPUT TRANSFORM: K:$L(X)>33!($L(X)<1) X STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 13 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE

LOCATION TYPE ------------------------------------------------------------ MAXIMUM LENGTH: 33 LAST EDITED: OCT 05,

2017 HELP-PROMPT: Enter the city of the permanent address of the person or institution associated with this

DEA Number. Answer must be 1-33 characters in length. DESCRIPTION: This is the city of the permanent address of the person or institution related to this DEA Number. 8991.9,1.6 STATE

1;6 POINTER TO STATE FILE (#5) STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 14 STORED IN

^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA

ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ LAST EDITED: OCT

05, 2017 HELP-PROMPT: Enter the stat of the permanent address associated with thie person or institution associated with this DEA Number. DESCRIPTION: This is the state of the permanent address of the person or institution associated with this DEA Number. 8991.9,1.7 ZIP CODE

1;7 FREE TEXT INPUT TRANSFORM: K:$L(X)>9!($L(X)<5) X STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 15 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE

LOCATION TYPE ------------------------------------------------------------ MAXIMUM LENGTH: 9 LAST EDITED: OCT 05,

2017 HELP-PROMPT: Enter the ZIP CODE or ZIP+4. Answer must be 5-9 characters in length. DESCRIPTION: This is the postal ZIP code of the person or institution associated with this DEA Number. 8991.9,2.1

SCHEDULE II NARCOTIC 2;1 SET '1' FOR YES; '0' FOR NO; STANDARD DATA DICTIONARY #8991.9

-- DEA NUMBERS FILE 9/17/18 PAGE 16 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA

ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ LAST EDITED: OCT 05,

2017 HELP-PROMPT: DEA number allows for schedule II drugs? DESCRIPTION: This field is used to determine if the provider has privileges for Schedule II drugs. 8991.9,2.2 SCHEDULE II NON-NARCOTIC 2;2 SET

'1' FOR YES; '0' FOR NO; LAST EDITED: OCT 05, 2017 HELP-PROMPT: Provider has privileges for schedule II non-narcotic? STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 17

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU

(VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE -----------------------------

------------------------------- DESCRIPTION: This field is used to determine if the provider has privileges for Schedule

II non-narcotic. 8991.9,2.3 SCHEDULE III NARCOTIC 2;3 SET '1' FOR YES; '0' FOR NO; LAST EDITED: OCT 05, 2017 HELP-PROMPT: Provider has privileges for schedule III narcotic? DESCRIPTION: This field is used to determine if the provider has privileges for Schedule II narcotic. STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 18 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON. MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ 8991.9,2.4 SCHEDULE III NON-NARCOTIC 2;4 SET

'1' FOR YES; '0' FOR NO; LAST EDITED: OCT 05, 2017 HELP-PROMPT: Provider has privileges for schedule III non-narcotic? DESCRIPTION: This field is used to determine if the provider

has privileges for Schedule III non-narcotic. 8991.9,2.5 SCHEDULE IV 2;5 SET '1' FOR YES; STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 19 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON. MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ------------------------------------------------------------ '0' FOR NO; LAST EDITED: OCT 05, 2017 HELP-PROMPT: Provider has privileges for schedule IV? DESCRIPTION: This field is used to determine if the provider has privileges for Schedule IV controlled substances.

8991.9,2.6 SCHEDULE V 2;6 SET '1' FOR YES; '0' FOR NO; STANDARD DATA DICTIONARY

#8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 20 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT

TITLE LOCATION TYPE ------------------------------------------------------------ LAST EDITED: OCT 05, 2017 HELP- PROMPT: Provider has privileges for schedule V? DESCRIPTION: This field is used to determine if the provider

has privileges for Schedule V controlled substances. 8991.9,10.1 LAST UPDATED BY 10;1 POINTER TO

NEW PERSON FILE (#200) LAST EDITED: OCT 05, 2017 HELP-PROMPT: Enter the person who last updated this DEA record. DESCRIPTION: This is the person from the NEW PERSON file who last initiated an update to this DEA record. STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 21 STORED IN

^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU (VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE --------------------------------------------------------

---- 8991.9,10.2 LAST UPDATED DATE/TIME 10;2 DATE INPUT TRANSFORM: S %DT="ESTX" D ^%DT S X=Y K:Y<1 X LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the date/time this DEA record was last updated. DESCRIPTION: This is the date/time of the last update to this DEA record. 8991.9,10.3 LAST DOJ UPDATE DATE/TIME 10;3 DATE INPUT TRANSFORM: S %DT="ESTX" D ^%DT S X=Y K:Y<1 X STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE

22 STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM L28,ROU

(VERSION 8.0) DATA NAME GLOBAL DATA ELEMENT TITLE LOCATION TYPE ----------------------

------------------------------------ LAST EDITED: OCT 05, 2017 HELP-PROMPT: Enter the date/time this DEA record was

last updated by the DOJ source. DESCRIPTION: This is the date/time the DOJ (Department of Justice) data was

|  |  |  |
| --- | --- | --- |
| used to update this DEA record. FILES POINTED TO | FIELDS DEA BUSINESS ACTIVITY CODES | (#8991.8) |
| BUSINESS ACTIVITY CODE (#.02) NEW PERSON (#200) | LAST UPDATED BY (#10.1) STATE (#5) | STATE (#1.6) Select |
| DATA DICTIONARY UTILITY OPTION:  Comments |  |  |

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**200074: CAS\_MPDU\_TC\_1.1.2.12 | Edit DEA Number Information for VA Providers in the EPCS GUI**



Creation Date: Oct 22, 2018 2:57:50 PM (UTC-05:00) Last Modified: Mar 22, 2019 8:56:31 AM (UTC-05:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_1.1.2.12 | Edit DEA Number Information for VA Providers in the EPCS GUI Description: Edit DEA number information for VA Providers in the EPCS GUI

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\* Example: DEA # AA#######**

Expected Results

Comments

Validates

Attachments

**Step 2**

**Information Step**

Description\*

**Scenario 1:** Ensure that user can update the DEA number information for **VA providers** using the EPCS GUI.

**Step 3**

**Execution Step**

Description\*

Log into EPCS GUI as a VA representative.

Expected Results

User will be taken to EPCS GUI screen. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side.

Expected Results

User will be displayed with “**Look up Utility**” modal with the following functions: OK>button: prescriber will be selected

Cancel>button: user will be taken back to the EPCS GUI main page

More>button: will display additional search list

Find>button: to search specific provider (last, first)

Details> button: will display the “Provider Details” with the following info: Name

• Title

• DUZ

• Service/Section

• Mail Code

• Initials

• Remarks

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Select a prescriber from the **Look up Utility** list and click OK button.

Expected Results

User will be taken back to the EPCS GUI screen with the value of a DEA # on the provider’s profile displayed as default in Prescriber DEA # field.

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Type a different numeric portion in the **Prescriber Detox/Maint # field** of the DEA number (7 digits) and click Update button. (Make a note of the changed DEA number).

Expected Results

The **Prescriber Detox/Maint #** field will be updated with the newly added Detox #.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Type a new Date in the Prescriber DEA Expiration Date field and click the Update button. (make a note of the change date).

Expected Results

The Prescriber DEA Expiration Date field will be updated with the new Date. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Select or deselect the desired options under **Authorized for schedules** and click the Update button.

Expected Results

The options that were updated will be displayed under the **Authorized for schedules** column.

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

To verify the updated changes, refresh EPCS GUI by selecting the same provider again.

With the help of an Admin if you don’t have access to FileMan, verify the changes have been updated and are reflected in the DEA number file.

Expected Results

The updated changes will be displayed.

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

**Scenario 2:**

Ensure that user can continue to update the DEA number information for **Non-VA**providersusing the EPCS GUI. Verify that the selected Non-VA provider has the Provider Type field set to “C&A” in 200 file .

(e.g.,Enter type of provider.

Choose from:

1 FULL TIME

2 PART TIME

3 C & A

4 FEE BASIS

5 HOUSE STAFF

Expected Results

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Repeat steps 1-7 for a Non-VA provider.

Expected Results

The updated changes will be displayed for a Non-VA provider. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

**Scenario 3:** Ensure user can edit schedule information associatedwith a **VA number** that is stored in File #200.

Expected Results

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Select an existing DEA # on the profile.

Expected Results

The updated changes will be displayed. Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Click on the **Edit VA #** button located next to the **Prescriber #**text field.

Expected Results

User will be displayed with a new window titled **VA Number Schedules.**

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Verify the window contains the 6 schedule fields and internal VA # only.

Expected Results

The **VA Number Schedules** contains 6 schedule fields and internal VA #.

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Type a new Prescriber VA #, select the desire schedule check box(s) and click the Update button.

**Note:** Make a note of the new Prescriber VA # and Schedules.

Expected Results

**Information** window will display stating **Update Completed** with **OK** button.

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Click the Edit VA # button again to verify the information for step 12 for the **Prescriber VA #** field and **VA Number**

**Schedules** window are updated.

Expected Results

Both **Prescriber VA #** field and the **VA Number Schedules** window are updated.

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Log into your local VistA instance.

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Navigate to the FileMan ‘Select OPTION prompt.

Expected Results

The ‘Select OPTION’ prompt is displayed. Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Type INQ and then press Enter.

Expected Results

The ‘Input from what File: NEW PERSON//’ prompt is

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘SELECT NEW PERSON NAME’ prompt is displayed. Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Type the name of the person and then press Enter.

Expected Results

The person’s information is

Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Verify the updates made to the VA # and the Schedule fields in the new window are reflected in File #200.

VA#: ##### SCHEDULE II NARCOTIC: Yes SCHEDULE II NON-NARCOTIC: Yes SCHEDULE III NARCOTIC: No SCHEDULE III NON-NARCOTIC: No SCHEDULE IV: No

SCHEDULE V: No

Expected Results

The updates made to the VA # and the Schedule fields are reflected in File #200.

Comments

Validates

Attachments

**Step 24**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**200312: CAS\_MPDU\_TS\_1.1.2.14 | Remove DEA number information from Provider Profile in the EPCS GUI**



Creation Date: Oct 24, 2018 11:06:43 AM (UTC-05:00) Last Modified: Feb 11, 2019 7:47:46 PM (UTC-06:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.14 | Remove DEA number information from Provider Profile in the EPCS GUI

Description: As a VA representative that credentials providers and/or updates DEA number information, I need the ability to remove a DEA number from a provider profile so that I can remove DEA numbers entered in error. The test case should contain all system activities that have significance to the VA representative.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\***

**Example: DEA # AA#######**

Expected Results

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

**Scenario 1:** Ensure that user can remove the DEA number information from provider’s profile in EPCS GUI.

**Note: Select the prescriber who meets precondition #1.**

Expected Results

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Log into EPCS GUI as a VA representative.

Expected Results

User will be taken to EPCS GUI screen.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side.

Expected Results

User will be displayed with “**Look Up Utility**” modal with the following functions: OK>button: prescriber will be selected

Cancel>button: user will be taken back to the EPCS GUI main page

More>button: will display additional search list

Find>button: to search specific provider (last, first)

Details> button: will display the “Provider Details” with the following info: Name

• Title

• DUZ

• Service/Section

• Mail Code

• Initials

• Remarks

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Select a prescriber from the **Look Up Utility** list and click OK button.

Expected Results

User will be taken back to the EPCS GUI screen with value of “DEA #” as default in Prescriber DEA # field.

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Attempt to remove the DEA number by clicking on the Delete button.

Expected Results

A dialog box will be displayed with the following information.

• Confirm (title)

• “Do you wish to remove the current DEA # of AA#######?” (confirmation prompt)

• “Removing the DEA number does not affect previously written prescriptions.” (message)

• Yes/No (buttons)

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Select the Yes button to remove DEA #.

Expected Results

A “Success” dialogue box will be displayed with the message “AA####### was deleted” and an “OK button.

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Click the OK button to continue.

Expected Results

User will be taken back to EPCS GUI screen.

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Upon removing a DEA number, verify any attributes related to the DEA Number are removed from the provider’s profile.

Expected Results

The changes will be displayed.

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

**Scenario 2:**Ensure that a user can remove the DEA number information from the profile of a provider who has no

VA # in the EPCS GUI.

**Note:Select the prescriber who meets precondition #2**

Expected Results

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Repeat steps 1-4.

Expected Results

User will be displayed a dialog box with the following information.

• Confirm-(title)

• “This is the only DEA number on file for this provider. The provider will no longer be able to prescribe controlled substances at the VA”-(message)

• Do you want to continue the deletion process?

• Yes/No (buttons)

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Click Yes button to continue the deletion process.

Expected Results

User will be displayed another dialog box with the following information.

• Confirm (title)

• “Do you wish to remove the current DEA # of AA#######?” (confirmation prompt)

• “Removing the DEA number does not affect previously written prescriptions.” (message)

• Yes/No (buttons)

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Click Yes button to remove the DEA #.

Expected Results

User will be displayed a “**Success**” dialog box with the message “AA####### was deleted” and a “OK button.

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Click the OK button.

Expected Results

User will be taken back to the EPCS GUI.

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

**Scenario 3:**Ensure that user can remove a DEA # that contains a Detox #.

**Note:Select the prescriber who meets precondition #3.**

Expected Results

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Repeat steps 1-4

Expected Results

The user will be displayed with a warning message as:

• Confirm (title)

• “This DEA # contains Detox # xxxxxxxxxxx. To maintain the Detox #, please add it to another DEA # on the provider’s profile.” (Message)

• “Do you want to continue the deletion process?” (confirmation prompt)

• Yes/No (buttons)

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Select the Yes button to remove DEA #.

Expected Results

User will be displayed a “**Confirm**” dialog box with the message “Do you wish to remove the current DEA # of

AA#######?” and “Yes/No” buttons.

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Select Yes button to continue.

Expected Results

User will be displayed a “**Success**” dialog box with the message “AA####### was deleted” and a “OK button.

Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Click OK button.

Expected Results

User will be taken back to the EPCS GUI.

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

**Scenario 4:** Ensure that user can remove a DEA # that does not contain a Detox #.

**Note:**Attempt adding the Detox number on the profile and then deleting the DEA #.

Expected Results

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Select a prescriber whose DEA # does not contain a Detox #.

Expected Results

User will be taken back to the EPCS GUI screen with value of “DEA #” as default in Prescriber DEA # field.

Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Add a Detox # in the Prescriber Detox/Maint # field and click the Update button.

Expected Results

User will be displayed with the information dialog box with ‘OK’ button.

Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Select the same prescriber with new Detox # from the dropdown.

Expected Results

User will be selected.

Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

Select the Delete button to remove DEA #.

Expected Results

User will be displayed a “**Confirm**” dialog box with the message “This DEA # contains a Detox # XP#######. To maintain the Detox #, please add it to another DEA # on the provider’s profile. Do you want to continue with the deletion process? Yes/No” buttons.

Comments

Validates

Attachments

**Step 25**

**Execution Step**

Description\*

Select Yes button to continue.

Expected Results

User will be displayed a “**Confirm**” dialog box with the message “This is the only DEA number on file for this provider. The provider will no longer be able to prescribe controlled substances at the VA. Do you want to continue the deletion process?” and “Yes/No” buttons.

Comments

Validates

Attachments

**Step 26**

**Execution Step**

Description\*

Click Yes button.

Expected Results

User will be displayed a “**Confirm**” dialog box with the message “Do you wish to remove the current DEA # of

AA#######? Removing the DEA number does not affect previously written prescriptions.” and “Yes/No” buttons.

Comments

Validates

Attachments

**Step 27**

**Execution Step**

Description\*

Select the “OK” button and verify the DEA # is removed by selecting the dropdown.

Expected Results

The DEA # with the newly added Detox # will be removed.

Comments

Validates

Attachments

**Step 28**

**Execution Step**

Description\* End of test.

Expected Results

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**200314: Allow Multiple DEA Numbers on Provider Profiles in EPCS GUI**



Creation Date: Oct 24, 2018 11:14:30 AM (UTC-05:00) Last Modified: Apr 19, 2019 9:15:43 AM (UTC-05:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture) Type: Manual

Test Data: Unassigned

Copied To:Copy of Allow Multiple DEA Numbers on Provider Profiles in EPCS GUI

Description: This test script is for a VA representative that credentials providers and/or updates DEA number information, the user can add MulDEA number(s) for VA providers using the EPCS GUI so that pharmacy can dispense controlled substance prescriptions written by VA providers. The test case should contain all system activities that have significance to the VA representative.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\* Example: DEA # AA#######**

**Step 2**

**Information Step**

Description\*

**Scenario 1:**The user can add multiple DEA numbers to a provider’s profile and each DEA number is associated with the attributes.

Note:

Select the prescriber who meets precondition #1.

**Step 3**

**Execution Step**

Description\*

Log into EPCS GUI

Expected Results

User will be taken to EPCS GUI screen

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side

Expected Results

User will be displayed with “**Look up Utility**” modal with the following functions: OK>button: prescriber will be selected

Cancel>button: user will be taken back to the EPCS GUI main page

More>button: will display additional search list

Find>button: to search specific provider (last, first)

Details> button: will display the “Provider Details” with the following info: Name

• Title

• DUZ

• Service/Section

• Mail Code

• Initials

• Remarks

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Select a prescriber from the Look up utility list and click OK button.

Expected Results

User will be taken back to the EPCS GUI screen with “DEA #” as default in Prescriber DEA # field. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Click on the dropdown to add a new DEA number. Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number

• <Add new DEA#>

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Select < Add new DEA # > from the dropdown.

Expected Results

The “Current/New DEA #” field is editable. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Enter a new DEA number in the Current/New DEA number field.

Expected Results

User will be able to type a new DEA number in the Current/New DEA number field. Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Enter a valid DEA number and click the “Copy” button.

Expected Results

The system will automatically search for a matching DEA number and the following DEA information will be displayed for confirmation:

• First Name, Last Name,

• Address 1,

• Address 2,

• Address 3,

• City, State, and Zip. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Click the **Add** button to add a DEA number.

Expected Results

A dialog box will display with the following information:

• “Data Entry for e-Prescribing Controlled Substances Information”-Title

• “(i) DEA # added and now selectable from the Prescriber DEA # dropdown list.” -message

• OK-button

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

After entering a 2nd DEA#, the Prescriber DEA # field shows an older one. You have to click the drop-down to see the new one.

Expected Results

The Prescriber DEA # field is populated with the added DEA number.

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Click on the dropdown to add a new DEA number. Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number

• AB#######-New DEA number

• < Add new DEA # >

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Select checkbox to set the DEA number to “Y” or “N” for “Inpatient Orders”. (As a default first DEA number is set for inpatient orders and when you have more than one then user can change to select the second DEA number).

Expected Results

User should be able to select the checkbox for “Inpatient Orders”.

Comments

Validates

Attachments

**Step 14**

**Information Step**

Description\*

**Scenario 2:**Ensure that the user can add multiple DEA numbers to the profile of a provider who has a VA # but no

DEA #.

**Note:**

Select a prescriber who meets precondition #2.

**Step 15**

**Execution Step**

Description\* Repeat steps 1-3.

Expected Results

User will be taken back to the EPCS GUI screen the “Add new DEA #” as default in the Prescriber DEA # field. Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Enter a new DEA number in the Current/New DEA number field.

Expected Results

User will be able to type a new DEA number in the Current/New DEA number field. Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Enter a valid DEA number and click the “Copy” button. Expected Results

The system will automatically search for a matching DEA number and the following information will be displayed in

the “DOJ” column for confirmation:

• First Name, Last Name

• Address 1

• Address 2

• Address 3

• City, State, and Zip

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Click the **Add** button to add a DEA number.

Expected Results

A dialog box will display with the following information:

• “Data Entry for e-Prescribing Controlled Substances Information”-Title

• “(i) DEA # added and now selectable from the Prescriber DEA # dropdown list.” -message

• OK-button

Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Verify the Prescriber DEA # field has the DEA number added.

Expected Results

The Prescriber DEA # field is populated with the added DEA number.

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Repeat steps 4-10 to add another DEA #. Note:Continue with steps 4-10 to add multiple DEA #s

Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number

• AB#######-New DEA number

• < Add new DEA # >

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

**Scenario 3:** Ensure that user can add Multiple DEA numbers for Non-VA provider with personal DEA # using the

EPCS GUI.

Note: Select a prescriber who meets precondition #3.

Verify the highlighted example contains in 200 file for providers type. (e.g., Enter type of provider.

Choose from:

1 FULL TIME

2 PART TIME

3 C & A

4 FEE BASIS

5. House Staff

Expected Results

Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Repeat steps 4-10 for a Non-VA provider. Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number

• AB#######-New DEA number

• < Add new DEA # >

Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

**Scenario 4:** Ensure that user can add Multiple DEA numbers for Non-VA

provider with no personal DEA # using the EPCS GUI.

**Note:**

Select a prescriber who meets precondition #4.

Verify the highlighted example contains in 200 file for providers type. (e.g., Enter type of provider.

Choose from:

1 FULL TIME

2 PART TIME

3 C & A

4 FEE BASIS

5 House Staff

Expected Results

Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

Select a prescriber who meets precondition #4 and repeat steps 4-10 for a Non-VA provider. Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number

• AB#######-New DEA number

• < Add new DEA # >

Comments

Validates

Attachments

**Step 25**

**Information Step**

Description\*

**Scenario 5:** Ensure that user can add Institutional DEA numbers for both VA and Non-VA providers.

**Step 26**

**Execution Step**

Description\*

Log into EPCS GUI

Expected Results

User will be taken to EPCS GUI screen

Comments

Validates

Attachments

**Step 27**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side. Expected Results

User will be displayed with “**Look Up Utility**” modal with the following functions:

OK>button: prescriber will be selected

Cancel>button: user will be taken back to the EPCS GUI main page

More>button: will display additional search list

Find>button: to search specific provider (last, first)

Details> button: will display the “Provider Details” with the following info: Name

• Title

• DUZ

• Service/Section

• Mail Code

• Initials

• Remarks

Comments

Validates

Attachments

**Step 28**

**Execution Step**

Description\*

Select a prescriber from the Look Up Utility list and click OK button

Expected Results

User will be taken back to the EPCS GUI screen with value of “DEA #” as default in Prescriber DEA # field.

Comments

Validates

Attachments

**Step 29**

**Execution Step**

Description\*

Click on the dropdown to add an Institutional DEA number

Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number (e.g)

• < Add new DEA # >

Comments

Validates

Attachments

**Step 30**

**Execution Step**

Description\*

Select < Add new DEA # > from the dropdown

Expected Results

The “Current/New DEA #” field is editable. Comments

Validates

Attachments

**Step 31**

**Execution Step**

Description\*

Enter an Institutional DEA number in the Current/New DEA number field.

Expected Results

User will be able to type a new DEA number in the Current/New DEA number field. Comments

Validates

Attachments

**Step 32**

**Execution Step**

Description\*

Enter a valid Institutional DEA number and click the “Copy” button

Expected Results

A dialog box will display with the following information:

• “Data Entry for e-Prescribing Controlled Substances Inquiry” (title)

• DOJ Name: (facility name)

• Vista Name: Last,First

• The names don’t match as this is an institutional DEA #. (message)

• Do you really want to continue?

• Yes/No (buttons)

Comments

Validates

Attachments

**Step 33**

**Execution Step**

Description\*

Click Yes and verify the DEA information is displayed in the DOJ column. Expected Results

The system will automatically search for a matching Institutional DEA number and the following DEA information

will be displayed in the DOJ column for confirmation:

• First Name, Last Name,

• Address 1,

• Address 2,

• Address 3,

• City, State and Zip.

Comments

Validates

Attachments

**Step 34**

**Execution Step**

Description\*

Click the **Add** button and attempt to add an Institutional DEA number without a Unique Suffix. Expected Results

A dialog box will display with the following error message:

• “Data Entry for e-Prescribing Controlled Substances Error”-Title

• “As this is an institutional DEA number, you must enter a unique Suffix for New DEA # between 3 and 10 characters in length.” -message

• OK-button

Comments

Validates

Attachments

**Step 35**

**Execution Step**

Description\*

Click the OK button and add a unique Suffix in the “Suffix for New DEA #” field

**Note:**

**User can only use the Suffix once per provider, the same Suffix will not work for another provider.**

Expected Results

User will be able to type a unique Suffix in the “Suffix for New DEA #” field.

Comments

Validates

Attachments

**Step 36**

**Execution Step**

Description\*

Click the **Add** button and attempt to add an Institutional DEA number. Expected Results

A dialog box will display with the following information:

• ‘Data Entry for e-Prescribing Controlled Substances Information’ (title)

• ‘DEA # added and now selectable from the Prescriber DEA # dropdown list.’ (message)

• ‘OK’ (button)

Comments

Validates

Attachments

**Step 37**

**Execution Step**

Description\*

Click the ‘OK’ button and verify the Institutional DEA # has been added in the dropdown list. Note:

After entering a 2nd DEA/institutional #, the Prescriber DEA # field shows an older one. You must click the drop-down to see the new one.

**User can only use the suffix once per provider, the same suffix will not work for another provider.**

Expected Results

The institutional DEA # will be added in the dropdown list.

Comments

Validates

Attachments

**Step 38**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**202408: CAS\_MPDU\_TS\_1.1.2.18\_DEA number Migration Exception**



**Log\_internal DEA # Migration Exception Log**

Creation Date: Nov 2, 2018 3:00:33 PM (UTC-05:00) Last Modified: Feb 11, 2019 7:46:15 PM (UTC-06:00) State: Draft

Originator: Khan, Tania (Accenture) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.18\_DEA number Migration Exception Log\_internal DEA # Migration Exception Log

Description: DEA number Migration Exception Log\_internal

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

• Access to Fileman

• Must have the PSDMGR (Pharmacy/Manager key) to view the Exception Log

Note:

Run this test script after executing test script 1.1.2.08 | Migrate Existing DEA # information from New Person File into

DEA file

**Step 2**

**Execution Step**

Description\*

Log into your local vista instance

Expected Results

User will be taken to the access/verify code prompts.

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

From primary menu, navigate to MailMan

Expected Results

Select OPTION NAME: MAILMAN

1 MAILMAN MASTER MENU XMMASTER MailMan Master Menu

2 MAILMAN MENU XMUSER MailMan Menu

3 MAILMAN SITE PARAMETERS XMKSP MailMan Site Parameters

CHOOSE 1-3: 2 XMUSER MailMan Menu

VA MailMan 8.0 service for IRWIN.BENJAMIN@FOIA.DOMAIN.EXT You last used MailMan: 11/02/18@14:20

You have no new messages.

NML New Messages and Responses

RML Read/Manage Messages

SML Send a Message

Query/Search for Messages

AML Become a Surrogate (SHARED,MAIL or Other)

Personal Preferences ...

Other MailMan Functions ...

Help (User/Group Info., etc.) ...

Select MailMan Menu <TEST ACCOUNT> Option: RML Read/Manage Messages

Select message reader: Detailed Full Screen// IN Basket, 2 messages (1-2)

\*=New/!=Priority...Subject.......................Lines.From...........Read/Rcvd

1. [84] 11/02/18 DEA Migration Exception Report 19 Lastname, Firstname

2. [85] 11/02/18 DEA Migration Exception Report 19 Lastname, Firstname

Subj: DEA Migration Exception Report 11/02/2018 [#85] 11/02/18@14:56 19 lines

From: Lastname,Firstname In 'IN' basket. Page 1

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

PROVIDER NAME: Provider 3 INITIALS: BI

TITLE: DUZ: ##

NPI: ########## DEA#: BI####### MAIL CODE: 10 CHAR MC

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

EXCEPTION: Existing DETOX XI1234563 and CALCULATED DETOX XI1956020 MISMATCH.

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

PROVIDER NAME: Provider 4 INITIALS: MLI

TITLE: DUZ: ##

NPI: DEA#: MI####### MAIL CODE:

REMARKS:

EXCEPTION: DETOX: XI####### DOESN'T MATCH BUSINESS ACTIVITY CODE.

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

PROVIDER NAME: Provider 5 INITIALS: SJV

DOJ PROVIDER NAME:

TITLE: DUZ: ##

NPI: DEA#: SV####### MAIL CODE:

REMARKS:

EXCEPTION: DEA# NOT FOUND IN DOJ FILE

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

IN Basket, 2 messages (1-2)

\*=New/!=Priority...Subject.......................Lines.From...........Read/Rcvd

1. [84] 11/02/18 DEA Migration Exception Report 19 Lastname,Firstname

2. [85] 11/02/18 DEA Migration Exception Report 19 Lastname,Firstname

Enter message number or command:

NML New Messages and Responses

RML Read/Manage Messages

SML Send a Message

Query/Search for Messages

AML Become a Surrogate (SHARED,MAIL or Other)

Personal Preferences ... Other MailMan Functions ...

Help (User/Group Info., etc.) ...

Select MailMan Menu <TEST ACCOUNT> Option: Do you really want to halt? YES//

Logged out at Nov 02, 2018 2:57 pm

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Verify data is available for provider 1 and 2 in file 200 and the new DEA file.

Expected Results

Data will be available for both providers in file 200 and the new DEA file. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Verify there is no error in the exception log for providers 1 and 2.

Expected Results

Exception log will have no errors for providers 1 and 2. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Verify the errors in the exception log in email for the rest of the providers.

Expected Results

The report will be delivered via email. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Verify the report includes the following information for each exception logged. a.Providers First and Last Name

b.DUZ (file 200 internal entry number, #.01)

c.MAIL CODE (#28) d.INITIALS (#1) e.TITLE (#8)

f. REMARKS (#53.9)

g.National Provider Identifier (NPI), if known

h.DEA number (old) associated with Provider Profile (new person file)

i. Exception (what happened)

Expected Results

The report will include the following information for each exception logged.

Comments

Validates

Attachments

**Step 8**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**202734: CAS\_MPDU\_TC\_1.1.2.22 | Provide Additional Fields to Facilitate**



**Selecting Correct Provider in ePCS**

Creation Date: Nov 6, 2018 3:39:10 PM (UTC-06:00) Last Modified: Jan 14, 2019 5:25:31 PM (UTC-06:00) State: Approved

Originator: Henderson, John (AbleVets LLC) Owner: Khan, Tania (Accenture) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_1.1.2.22 | Provide Additional Fields to Facilitate Selecting Correct Provider in ePCS

Description: As a VA representative that credentials providers and/or updates DEA number information using ePCS, I want the provider selection list to display additional identifiers so that I can select the correct entry among multiple providers who share the same first/mi/last name.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\***

**Example: DEA # AA#######**

**Step 2**

**Information Step**

Description\*

**Scenario 1:**

A new window with additional information will be displayed about the selected provider by clicking the “Details” button in the Provider Look Up Utility.

**Step 3**

**Execution Step**

Description\*

Log into EPCS GUI.

Expected Results

User will be taken to EPCS GUI screen.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side.

Expected Results

User will be displayed with “**Look up Utility**” modal with the list of providers with provider’s title next to it on the left side and the following functions on the right.

• **OK**>button: prescriber will be selected

• **Cancel**>button: user will be taken back to the EPCS GUI main page

• **More**>button: will display additional search list

• **Find**>button: to search specific provider (last, first)

• **Details**> button: will display the “Provider Details” with the following info.

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Select a prescriber from the Look up utility list and click “Details” button.

Expected Results

A new window title “Provider Details” with the following information will be displayed.

Name: Title: DUZ:

Service/Section: Mail Code: Initials:

Remarks: OK -button

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Click on the X or OK button to dismiss the window.

Expected Results

User will be taken back to the Look Up Utility window.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\* End of test.

Expected Results

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**204155: 1.3.1.04 | Prevent provider from electronically prescribing controlled substance schedules the provider is not authorized to prescribe**



Creation Date: Nov 17, 2018 12:52:44 PM (UTC-06:00) Last Modified: Apr 24, 2019 1:28:10 PM (UTC-05:00) State: Draft

Originator: Henderson, John (AbleVets LLC) Owner: Paturi, Anuradha- (Ablevets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of 1.3.1.04 | Prevent provider from electronically prescribing controlled substance schedules the provider is not authorized to prescribe

Description: As a provider using CPRS to write prescriptions, I want to be prevented from prescribing controlled substance schedules that I am not authorized to prescribe so I am compliant with DEA regulations.

Acceptance Criteria:

1. When entering an electronic prescription or order, I want to receive an error message if I select a controlled substance with a schedule for which I am not authorized to prescribe for the selected DEA #.

a. I want the error to state:

“Order for controlled substance could not be completed. Provider is not authorized to prescribe medications in Federal Schedule <XX [ 2 | 2N | 3 | 3N | 4

| 5]>.

Click RETRY to select another provider. Click CANCEL to cancel the current order.”

2. When entering an electronic Inpatient order, I want the DEA # with the “Use for Inpatient Orders?’ flag =” Y” on my profile to be used for the inpatient order.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

Scenario 1: User has DEA # that is not valid for a Schedule CS drug (Schedule 2,2n,3,3n,4 & 5) for ex- Schedule IV Login to CPRS as a valid Provider -> Select Patient -> Go to Orders tab -> Meds, Out Patient

Expected Results

Out Patient Medications window displayed

Comments

Validates

Attachments

**Step 2**

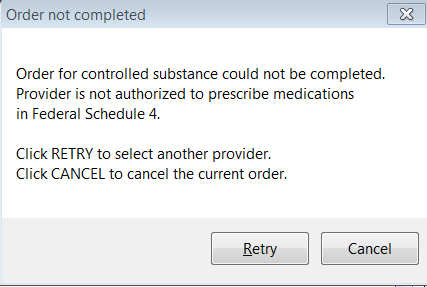
**Execution Step**

Description\*

Enter a CS drug that is schedule IV and select from the list - Click Ok ex - Alprazolam

Expected Results

Error message is displayed -



Comments

Validates

Attachments

**Step 3**

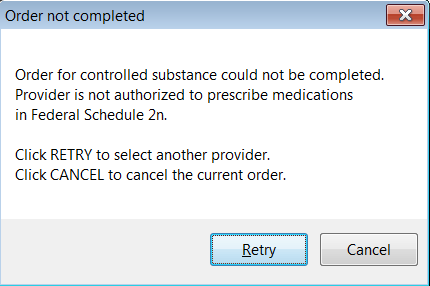
**Execution Step**

Description\*

Select a provider whose DEA # is not valid for Schedule 2n and enter a CS drug that is schedule 2n. Example- DEXTROAMPHETAMINE SO4

Expected Results

Error message will be displayed for 2n-



Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Scenario 2 - User has multiple DEAs and In Patient flag set to Yes at least for one of the DEA #. Patient selected is an In Patient. Login to CPRS as a valid Provider -> Select Patient -> Go to Orders tab -> Meds, In Patient

Expected Results

In Patient medication window displayed

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Enter the CS medication and select from the list. Click OK

Expected Results

No DEA# window displayed as in for Out patient. Provider can proceed with Prescription Order as in existing functionality. Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**204265: CAS\_MPDU\_TS\_1.3.1.06 Require Provider profiles to have schedule-specific permissions – Remove Grandfathering (VistA)**



Creation Date: Nov 19, 2018 2:53:18 PM (UTC-06:00) Last Modified: Feb 6, 2019 7:32:49 PM (UTC-06:00) State: Draft

Originator: Henderson, John (AbleVets LLC) Owner: Henderson, John (AbleVets LLC)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.3.1.06 Require Provider profiles to have schedule-specific permissions – Remove Grandfathering (VistA) Description: As an administrator responsible for setting and checking provider privileges to prescribe controlled substance medications, I need the logic

within specified VistA options to be updated with the new business rules that require schedule-specific permissions to be assigned for each provider so that it does not provide a false positive indication of prescriber setup.

Scenario 1:

I want the new business rules eliminating grandfathering to be applied to the following VistA options:

A. EPCS User Enable/Disable [USER]

When a disabled provider is enabled and there is no schedule data present on the DEA # with the “Use for Inpatient?” flag, I want the current message “Successfully enabled ProviderName and it is permitted to prescriber all schedules due to grandfathering.” to be replaced by the existing message “Cannot enable ProviderName to sign controlled substance orders because it is not permitted to prescribe any schedules.”

Scenario 2:

B. From the CHK option:

When there is no schedule data present for a provider: i. I want the message “Once all of the issues above are resolved, the provider is permitted to prescribe all schedules due to grandfathering.” to be replaced by the existing message “Is not permitted to prescribe any schedules.”. ii. I want the message “This provider is able to write controlled substance orders and is permitted to prescribe all schedules due to grandfathering.” to be replaced by the existing message “Is not permitted to prescribe any schedules.”

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

Must have vistA access.

Provider who was included in the initial load.

Remove all DEA #s for that provider from the DEA NUMBERS FILE #8991.9

Remove all the DEA Schedule entries from the NEW PERSON FILE #200

Ensure that there is a DEA NUMBER entered in the DEA# field of the NEW PERSON FILE #200. Run the INITIAL LOAD PROCESS using the following.

a.D INITLOAD^PSO7P529

b.\*\*\* This routine does not exist on the SQA environment. \*\*\*

Please ask Anwer to place this routine on your account. He likes to set the patches to remove the routines after the patch installation. This makes this type of need harder than it needs to be

**Step 2**

**Information Step**

Description\*

**Scenario 1:**

From the CHK option:

When there is no schedule data present for a provider: i. I want the message “Once all of the issues above are resolved, the provider is permitted to prescribe all schedules due to grandfathering.” to be replaced by the existing message “Is not permitted to prescribe any schedules.”. ii. I want the message “This provider is able to write controlled substance orders and is permitted to prescribe all schedules due to grandfathering.” to be replaced by the existing message “Is not permitted to prescribe any schedules.”

**Step 3**

**Execution Step**

Description\*

Log into your local VistA instance

Expected Results

User will be taken to the access/verify code prompts

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Navigate to the FileMan ‘Select Option’ prompt.

Expected Results

The ‘Select OPTION’ prompt is displayed. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Type Enter and then press Enter.

Expected Results

The ‘Input from what File: NEW PERSON//’ prompt is displayed. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Type 8991.9 and then press Enter.

Expected Results

The ‘Edit Which Field’ prompt is displayed

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The Select DEA Numbers prompt is displayed. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Type the DEA number you wish to use and then press Enter.

Expected Results

The providers information listed for the DEA number is displayed. DEA NUMBER: AG#######//

BUSINESS ACTIVITY CODE: C0// DETOX NUMBER: XG#######// EXPIRATION DATE: SEP 1,2018// DEA NUMBER SUFFIX:

USE FOR INPATIENT ORDERS?: YES// TYPE: INDIVIDUAL//

NAME (PROVIDER OR INSTITUTION): Last, First// STREET ADDRESS 1: 923 Main Street//

STREET ADDRESS 2: ADDRESS 2// STREET ADDRESS 3: ARRDESS 3//

CITY: Any City// STATE: TEXAS// ZIP CODE: 75025//

SCHEDULE II NARCOTIC: Y YES SCHEDULE II NON-NARCOTIC: Y YES SCHEDULE III NARCOTIC: Y YES SCHEDULE III NON-NARCOTIC: Y YES SCHEDULE IV: Y YES

SCHEDULE V: Y YES

LAST UPDATED BY: ANWER,MOHAMED H//

LAST UPDATED DATE/TIME: JUL 10,2018@15:38:48// LAST DOJ UPDATE DATE/TIME: JUN 25,2018//

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Log into your local VistA instance

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

At the Option prompt type CHECK PROVIDER EPCS and then press Enter.

Expected Results

The ‘Select the provider prompt’ is displayed.

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Type the name of the provider and then press Enter.

Expected Results

The ‘This provider is able to write controlled substance orders and is permitted to prescribe all schedules’ message.is displayed.

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Navigate back to FILEMAN.

Expected Results

The ‘Select Option’ prompt is displayed. Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Type the name of the provider and then press Enter.

Expected Results

The ‘This provider is able to write controlled substance orders and is permitted to prescribe all schedules’ message.is displayed.

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Navigate back to FILEMAN.

Expected Results

The ‘Select Option’ prompt is displayed. Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

The ‘Select Option’ prompt is displayed.

Expected Results

The Input to what File: NEW PERSON// 8991.9 DEA NUMBERS prompt is displayed. Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Type the DEA number you wish to use and then press Enter.

Expected Results

The providers information listed for the DEA number is displayed. DEA NUMBER: AG#####//

BUSINESS ACTIVITY CODE: C0// DETOX NUMBER: XG#####// EXPIRATION DATE: SEP 16,2018//

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Change the expiration date so that it is now in an expired state. DEA NUMBER: AG#####//

BUSINESS ACTIVITY CODE: C0//

DETOX NUMBER: XG#####//

EXPIRATION DATE: SEP 16,2018// T-30 (JUN 18, 2018) Expected Results

The DEA number expiration date is now changed.

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Log into your local VistA instance

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

At the Option prompt type CHECK PROVIDER EPCS and then press Enter.

Expected Results

The ‘Select the provider’ prompt is displayed. Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Type the name of the provider and then press Enter.

Expected Results

The following message is displayed:

This provider is not able to write controlled substance orders for the following reasons:

Has an expired DEA number.

Is no longer able to write medication orders (inactive date).

Once all of the issues above are resolved, the provider is permitted to prescribe all schedules.

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Navigate back to the Option prompt and type EPCS USER and then press Enter.

Expected Results

The Select the USER NAME prompt is displayed. Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Type the user name and then press Enter.

Expected Results

The ‘Last, First is currently disabled.Do you want to enable Last, First? NO//’ prompt is displayed. Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Type Yes and then press Enter.

Expected Results

The ‘Cannot enable Last, First to sign controlled substance orders because

he is no longer able to write medication orders (inactive date)’ message is displayed. Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

Navigate back to FILEMAN. The ‘Select Option’ prompt is displayed.

Expected Results

The Input to what File: NEW PERSON// 8991.9 DEA NUMBERS prompt is displayed. Comments

Validates

Attachments

**Step 25**

**Execution Step**

Description\*

Press Enter to continue.The ‘EDIT WHICH FIELD: ALL//’ prompt is displayed.

Expected Results

The ‘Select DEA NUMBERS:’ prompt is displayed. Comments

Validates

Attachments

**Step 26**

**Execution Step**

Description\*

Type the DEA number you wish to use and then press Enter.

Expected Results

The providers information listed for the DEA number is displayed.

Comments

Validates

Attachments

**Step 27**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

DEA NUMBER: AG######// BUSINESS ACTIVITY CODE: C0// DETOX NUMBER: XG######// EXPIRATION DATE: JUN 18,2018// DEA NUMBER SUFFIX:

USE FOR INPATIENT ORDERS?:YES//

Comments

Validates

Attachments

**Step 28**

**Execution Step**

Description\*

Change the expiration date so that it is now in an active state.

Expected Results

DEA NUMBER: AG#####// BUSINESS ACTIVITY CODE: C0// DETOX NUMBER: XG#####//

EXPIRATION DATE: SEP 16,2018// T+30 (AUG 18, 2018) The DEA number expiration date is now changed.

Comments

Validates

Attachments

**Step 29**

**Information Step**

Description\* Scenario 2:

A. EPCS User Enable/Disable [USER]

When a disabled provider is enabled and there is no schedule data present on the DEA # with

the “Use for Inpatient?” flag, I want the current message “Successfully enabled ProviderName and it is permitted to prescriber all schedules due to grandfathering.” to be

replaced by the existing message “Cannot enable ProviderName to sign controlled substance orders because it is not permitted to prescribe any schedules.”

**Step 30**

**Execution Step**

Description\*

Log into your local VistA instance.

User will be taken to the access/verify code prompts.

Expected Results

The ‘Select the USER NAME’ prompt is displayed. Comments

Validates

Attachments

**Step 31**

**Execution Step**

Description\*

Type the name of the user and then press Enter.

Expected Results

The ‘Do you want to enable Last, First? NO//’ prompt is displayed. Comments

Validates

Attachments

**Step 32**

**Execution Step**

Description\*

Type YES and then press Enter.

Expected Results

The ‘Successfully enabled Last, First and he is permitted to prescribe all schedules is displayed. Comments

Validates

Attachments

**Step 33**

**Execution Step**

Description\*

Navigate back to FILEMAN.

The ‘Select Option’ prompt is displayed. Expected Results

The Input to what File: NEW PERSON// 8991.9 DEA NUMBERS prompt is displayed.

Comments

Validates

Attachments

**Step 34**

**Execution Step**

Description\*

Type Enter and then press Enter.

Expected Results

The EDIT WHICH FIELD: ALL//’ prompt is displayed. Actions

Type the DEA number and then press Enter. Comments

Validates

Attachments

**Step 35**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The providers information listed for the DEA number is displayed.

Change the schedule prompts from YES to NO. DEA NUMBER: AG#######//

BUSINESS ACTIVITY CODE: C0// DETOX NUMBER: XG#######// EXPIRATION DATE: SEP 16,2018// DEA NUMBER SUFFIX:

USE FOR INPATIENT ORDERS?: YES// TYPE: INDIVIDUAL//

NAME (PROVIDER OR INSTITUTION): Last, First// STREET ADDRESS 1: 923 Main Street//

STREET ADDRESS 2: ADDRESS 2// STREET ADDRESS 3: ARRDESS 3// CITY: Any City//

STATE: TEXAS//

ZIP CODE: 75025//

SCHEDULE II NARCOTIC: Y NO SCHEDULE II NON-NARCOTIC: Y NO SCHEDULE III NARCOTIC: Y NO SCHEDULE III NON-NARCOTIC: Y NO SCHEDULE IV: Y NO

SCHEDULE V: Y NO

LAST UPDATED BY: ANWER,MOHAMED H//

LAST UPDATED DATE/TIME: JUL 10,2018@15:38:48// LAST DOJ UPDATE DATE/TIME: JUN 25,2018// Comments

Validates

Attachments

**Step 36**

**Execution Step**

Description\*

Log into your local VistA instance.User will be taken to the access/verify code prompts.

Expected Results

At the Option prompt type CHECK PROVIDER EPCS and then press Enter. Comments

Validates

Attachments

**Step 37**

**Execution Step**

Description\*

The Select the USER NAME: prompt is displayed.

Expected Results

The ‘Do you want to disable LAST, FIRST? NO/’ prompt is displayed. Comments

Validates

Attachments

**Step 38**

**Execution Step**

Description\*

Type YES and then press Enter

Expected Results

The ‘Successfully disabled LAST, FIRST’ prompt is displayed. Comments

Validates

Attachments

**Step 39**

**Execution Step**

Description\*

Type the name of the user and then press Enter.

Expected Results

The ‘Do you want to enable LAST, FIRST? NO/’ prompt is displayed. Comments

Validates

Attachments

**Step 40**

**Execution Step**

Description\*

Type YES and then press Enter.

Expected Results

The ‘Cannot enable LAST, FIRST to sign controlled substance orders because he is not permitted to prescribe any schedules’ message is displayed. End of test.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**204270: CAS\_MPDU\_1.1.2.04 | Hide specified fields in VistA in PSO Provider ADD/EDIT options (DEA)**



Creation Date: Nov 19, 2018 3:15:46 PM (UTC-06:00) Last Modified: Apr 19, 2019 9:50:22 AM (UTC-05:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_1.1.2.04 | Hide specified fields in VistA in PSO Provider ADD/EDIT options (DEA)

Description: As a Pharmacy Systems Manager, I want the current DEA number information in the provider add/edit options hidden from view so that it is inaccessible to end users but available in the database for historical purposes after the implementation of the new DEA number records.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\***

**Step 2**

**Execution Step**

Description\*

Log into your local vista instance

Expected Results

User will be taken to the access/verify code prompts

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

At the prompt type “Core Applications > Outpatient pharmacy manager> supervisor functions

Expected Results

Supervisor Functions menu should display

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Navigate to the ‘Add New Provider” options.

Expected Results

1 “Enter NEW PERSON's name (Family,Given Middle Suffix):” will be prompted. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

At the prompt for ‘Enter NEW PERSON's name (Family,Given Middle Suffix):’, type a provider’s name who is not in the system and press Enter.

Expected Results

Enter NEW PERSON's name (Family,Given Middle Suffix): LASTNAME,FIRSTNAME

LASTNAME,FIRSTNAME is NOT currently indicated as being a provider. Do you want to make LASTNAME,FIRSTNAME a provider? (Y/N): NO// YES

NON-VA PRESCRIBER: TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: DEA NUMBERS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Type a DEA number and press Enter starting with the following character: Note:

The first character is either a "A", "B”, “F”, “G” or “M”.

Expected Results

User will be able to enter a DEA starting with the letters mentioned above.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\* Press <Enter>

Expected Results

The ‘DEA NUMBER MANAGEMENT’ screen will display.

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Type C to ‘COPY DOJ/DEA VALUES TO VISTA’

Expected Results

**DEA** **NUMBER** **MANAGEMENT** Mar 25, 2019@11:56:01 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: LASTNAME,FIRSTNAME LASTNAME,FIRSTNAME

|  |  |  |
| --- | --- | --- |
| ADDRESS 1: | 7900 MAIN STREET | 7900 MAIN STREET |
| ADDRESS 2: | ADDRESS STREET7322 | ADDRESS STREET7322 |
| ADDRESS 3: | ARRDESS STREET7323 | ARRDESS STREET7323 |
| CITY: | PLANO | PLANO |
| STATE: | TEXAS | TEXAS |
| ZIP CODE: | 75025 | 75025 |
| ACTIVITY CODE: | C0 | C0 |
| TYPE: | INDIVIDUAL | INDIVIDUAL |
| DEA NUMBER: | XXNNNNNNN | XXNNNNNNN |
| DETOX NUMBER: |  |  |
| EXPIRATION DATE: | MAY 31, 2020 | MAY 31, 2020 |
| SCH II NARC: | YES | YES |
| SCH II NON-NARC: | YES | YES |
| SCH III NARC: | YES | YES |
| SCH III NON-NARC: | YES | YES |
| SCH IV: | YES | YES |

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen// A ACCEPT AND SAVE CHANGES

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE’ the changes. Expected Results

VA#:

INACTIVE DATE:

PROVIDER CLASS: ^

Enter NEW PERSON's name (Family,Given Middle Suffix):

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Select the same provider and verify the following existing fields hidden from onscreen display:

a. Prescriber DEA # (field 53.2)

b. Prescriber DEA expiration date (field 747.44)

c. Prescriber Detox/Maint # (field 53.11)

Expected Results

Provider: LASTNAME,FIRSTNAME

DEA NUMBER: XXNNNNNNN DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE V: YES

NON-VA PRESCRIBER:

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

From the ‘Edit Provider” option.

Expected Results

The “Select Provider:” prompt will be displayed. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

At the prompt for “Select Provider:”, type a provider’s name and press Enter.

Expected Results

Provider: LASTNAME,FIRSTNAME

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

VA#: 9912343

DEA NUMBER: XX####### DEA NUMBER: XX####### DETOX NUMBER: DETOX NUMBER: XR1234563

EXPIRATION DATE: JAN 06, 2020 EXPIRATION DATE: MAY 31, 2020

SCHEDULE II NARCOTIC: NO SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: NO SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: NO SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES

NON-VA PRESCRIBER:

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Verify the following existing fields are hidden from onscreen display and new format is displayed.

a. Prescriber DEA # (field 53.2)

b. Prescriber DEA expiration date (field 747.44)

c. Prescriber Detox/Maint # (field 53.11)

Expected Results

Provider: LASTNAME,FIRSTNAME

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

VA#: 9912343

DEA NUMBER: XX####### DEA NUMBER: XX####### DETOX NUMBER: DETOX NUMBER: XR1234563

EXPIRATION DATE: JAN 06, 2020 EXPIRATION DATE: MAY 31, 2020

SCHEDULE II NARCOTIC: NO SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: NO SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: NO SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES

NON-VA PRESCRIBER:

Comments

Validates

Attachments

**Step 14**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**204640: CAS\_MPDU\_TS\_1.1.2.13 | Remove DEA number information from Non-VA Providers Profile in VistA**



Creation Date: Nov 20, 2018 5:33:51 PM (UTC-06:00) Last Modified: Apr 11, 2019 9:04:36 AM (UTC-05:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.13 | Remove DEA number information from Non-VA Providers Profile in VistA Description: Scenario 1: The user can remove a DEA number from provider’s profile.

Scenario 2: Ensure that user can remove the DEA number information from provider’s no VA # profile in VistA. Scenario 3: Ensure that user can remove a VA # that contains no DEA#.

Scenario 4: Ensure that user can remove a DEA # that contains a Detox #.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\***

**Example: DEA # AA#######**

**Step 2**

**Information Step**

Description\*

**Scenario 1:** Ensure that user can remove the DEA number information from provider’s profile in VistA.

**Note:Select the prescriber who meets precondition #1.**

**Step 3**

**Execution Step**

Description\*

Log into VistA as a VA representative.

Expected Results

User will be taken to access/verify code prompts. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

From the menu navigate to outpatient pharmacy manager>supervisor functions

Expected Results

Supervisor functions menu displays

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

From menu, select “EDIT PROVIDER” and enter a provider..

Expected Results

Select Supervisor Functions <TEST ACCOUNT> Option: edit provider

Select Provider:

Provider: LASTNAME, FIRSTNAME

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: C & A

DEA NUMBER: AP2097663

DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE V: YES

NON-VA PRESCRIBER: TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES// DEA NUMBERS

1 - AP2097663 TEXAS

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Verify the following prompt is displayed under the list of DEA #s displayed:

“SELECT an existing entry to edit,

Type a DEA number (e.g. AA1234563) to begin a new entry, or type ‘@’ to delete an existing entry.”

Expected Results

DEA NUMBERS

1 - AP2097663 TEXAS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.: @

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Attempt to remove a DEA # by using the @ sign and verify that information message is displayed.

Expected Results

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.: @

Select a choice from the list for DELETION.: (1-1): 1

Removing the DEA number does not affect previously written prescriptions. This is the only DEA number on file for this provider. The provider will no

longer be able to prescribe controlled substances at the VA via CPRS or paper prescriptions.

DO YOU STILL WANT TO DELETE THIS DEA NUMBER? YES

VA#:

Comments

Validates

Attachments

**Step 8**

**Information Step**

Description\*

**Scenario 2:**Ensure that a user can remove the DEA number information from the profile of a provider who has no

VA # in the VistA.

**Note:Select the prescriber who meets precondition # 2.**

**Step 9**

**Execution Step**

Description\*

Navigate to ‘EDIT PROVIDER’ option and select a provider with no VA #.

Expected Results

Provider: LASTNAME, FIRST

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FEE BASIS

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. VA#:

DEA NUMBER: BI####### DETOX NUMBER: XI####### EXPIRATION DATE: DEC 11, 2018

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE III NARCOTIC: NO SCHEDULE III NON-NARCOTIC: NO

SCHEDULE IV: YES SCHEDULE V: YES

STREET ADDRESS 1: 1515 ANY STREET APARTMENT 123

STREET ADDRESS 2: FLOOR 321 SECTION 120 WING 3

STREET ADDRESS 3: ADDRESS #3

CITY: EAST RIDGE STATE: TENNESSEE ZIP CODE: 37373

OFFICE PHONE: 423-531-4545 PHONE #3: 890-567-1234

PHONE #4: 980-123-4567 COMMERCIAL PHONE: 800-555-5555

FAX NUMBER: 800-444-4444 VOICE PAGER: 800-333-3333

DIGITAL PAGER: 800-222-2222

ROOM: 777A

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - BI####### TENNESSEE Contains Detox # XI#######

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Attempt to remove a DEA # by using the @ sign and verify that information message is displayed.

Expected Results

The following warning message will be displayed:

“This is the only DEA number on file for this provider. The provider will no longer be able to prescribe controlled substances at the VA via CPRS or paper prescriptions.”

Comments

Validates

Attachments

**Step 11**

**Information Step**

Description\*

**Scenario 3:** Ensure that user can remove a VA # that contains no DEA#.

**Note:Select the prescriber who meets precondition #3.**

**Step 12**

**Execution Step**

Description\*

Navigate to ‘EDIT PROVIDER’ option and select a provider with no VA # and no DEA # present.

Expected Results

Provider: LASTNAME, FIRST

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FEE BASIS

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. VA#:

DEA NUMBER: DETOX NUMBER:

EXPIRATION DATE: DEC 11, 2018

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE III NARCOTIC: NO SCHEDULE III NON-NARCOTIC: NO

SCHEDULE IV: YES SCHEDULE V: YES

STREET ADDRESS 1: 1515 ANY STREET APARTMENT 123

STREET ADDRESS 2: FLOOR 321 SECTION 120 WING 3

STREET ADDRESS 3: ADDRESS #3

CITY: EAST RIDGE STATE: TENNESSEE ZIP CODE: 37373

OFFICE PHONE: 423-531-4545 PHONE #3: 890-567-1234

PHONE #4: 980-123-4567 COMMERCIAL PHONE: 800-555-5555

FAX NUMBER: 800-444-4444 VOICE PAGER: 800-333-3333

DIGITAL PAGER: 800-222-2222

ROOM: 777A

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES// DEA NUMBERS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Attempt to remove a VA # by using the @ sign when DEA # is not present and verify a warning message is displayed.

Expected Results

The following warning message will be displayed:

“Removing the VA number does not affect previously written prescriptions. There are no DEA#'s on file for this provider. The provider will no longer be able to prescribe controlled substances at the VA via CPRS or paper prescriptions.”

Comments

Validates

Attachments

**Step 14**

**Information Step**

Description\*

**Scenario 4:**Ensure that user can remove a DEA # that contains a Detox #.

**Note:Select the prescriber who meets precondition #4.**

**Step 15**

**Execution Step**

Description\*

Navigate to ‘EDIT PROVIDER’ option and select a provider with no VA # and no DEA # present.

Expected Results

NON-VA PRESCRIBER: NO

Provider: LASTNAME, FIRST

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FEE BASIS

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. VA#: BI####

DEA NUMBER: BI####### DETOX NUMBER: XI####### EXPIRATION DATE: DEC 11, 2018

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE III NARCOTIC: NO SCHEDULE III NON-NARCOTIC: NO

SCHEDULE IV: YES SCHEDULE V: YES

STREET ADDRESS 1: 1515 ANY STREET APARTMENT 123

STREET ADDRESS 2: FLOOR 321 SECTION 120 WING 3

STREET ADDRESS 3: ADDRESS #3

CITY: EAST RIDGE STATE: TENNESSEE ZIP CODE: 37373

OFFICE PHONE: 423-531-4545 PHONE #3: 890-567-1234

PHONE #4: 980-123-4567 COMMERCIAL PHONE: 800-555-5555

FAX NUMBER: 800-444-4444 VOICE PAGER: 800-333-3333

DIGITAL PAGER: 800-222-2222

ROOM: 777A

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - BI####### TENNESSEE Contains Detox # XI#######

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.: 1

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Attempt to remove a DEA # that contains a Detox # and verify a warning message is displayed with a confirmation to continue the deletion process.

Expected Results

The following warning message will be displayed.

“This DEA # contains Detox # xxxxxxxxxxx. To maintain the Detox #, please add it to another DEA # on the provider’s profile.”

Comments

Validates

Attachments

**Step 17**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**204641: CAS\_MPDU\_TS\_1.1.2.09 Add DEA Number Information for Non- VA Providers in VistA**



Creation Date: Nov 20, 2018 5:38:42 PM (UTC-06:00) Last Modified: Mar 26, 2019 9:05:20 AM (UTC-05:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Gupta, Poonam (AbleVets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.09 Add DEA Number Information for Non-VA Providers in VistA Description: Add DEA Number Information for Non-VA Providers in VistA

User must be assigned with a valid DEA number (Local and Institutional) User must have access to VistA

Identify a DEA number which is associated with another provider.

Set Pharmacy Operating Mode to:

• “MBM” (for any provider type)

• “VAMC” (for FEE BASIS or C&A provider types only)

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\* Example: DEA # AA#######**

Expected Results

Comments

Validates

Attachments

**Step 2**

**Information Step**

Description\*

**Scenario 1:**

The user can add DEA numbers for Non-VA provider using the VistA in the format (i.e. AA#######)

**Step 3**

**Execution Step**

Description\*

Log into VistA instance.

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Navigate to Core Applications> outpatient pharmacy>Supervisor functions

From menu, select “Add NEW Providers” and enter a provider. . Expected Results

1.Select Supervisor Functions <TEST ACCOUNT> Option: ADD NEW Providers Enter NEW PERSON's name

(Family,Given Middle Suffix): Provider: LASTNAME, FIRSTNAME AUTHORIZED TO WRITE MED ORDERS: YES DEA NUMBER: XXNNNNNNN DETOX NUMBER: EXPIRATION DATE: MAY 31,

2020 SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE V: YES

OFFICE PHONE: (222) 222-2222 NON-VA PRESCRIBER: TAX ID: EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST: AUTHORIZED TO WRITE MED ORDERS: YES// DEA NUMBERS

1 - XXNNNNNNN TEXAS SELECT an existing entry to edit, Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.:

Edit Provider

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Type a DEA number and press Enter.

Note: The first character is either a "A", "B”, “F”, “G” or “M”.

Expected Results

User will be able to enter a DEA starting with the letters mentioned above.

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\* Press <Enter>

Expected Results

The ‘DEA NUMBER MANAGEMENT’ screen will display. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Type C to ‘COPY DOJ/DEA VALUES TO VISTA’.

Expected Results

**DEA NUMBER MANAGEMENT** Dec 12, 2018@00:31:27 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE

|  |  |  |
| --- | --- | --- |
| NAME: | EDWARD HINES JR VA HOSPITAL | EDWARD HINES JR VA HOSPITAL |
| ADDRESS 1: | VAMC- | VAMC- |
| ADDRESS 2: | 5000 S 5TH AVE | 5000 S 5TH AVE |
| ADDRESS 3: | BLDG 200, ROOM B109 PHARMACY | BLDG 200, ROOM B109 PHARMACY S |
| CITY: | HINES | HINES |
| STATE: | ILLINOIS | ILLINOIS |
| ZIP CODE: | 601410000 | 601410000 |
| ACTIVITY CODE: | B5 | B5 |
| TYPE: | INSTITUTIONAL | INSTITUTIONAL |
| DEA NUMBER: | AV5589532 | AV5589532 |
| DETOX NUMBER: |  |  |
| EXPIRATION DATE: | AUG 31, 2019 | AUG 31, 2019 |
| SCH II NARC: | YES | YES |
| SCH II NON-NARC: | YES | YES |
| SCH III NARC: | YES | YES |
| SCH III NON-NARC: | YES | YES |

SCH IV: YES YES

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE’ and verify the DEA # has been added by selecting the same provider.

Expected Results

INDIVIDUAL DEA SUFFIX: AP1

VA#:

INACTIVE DATE: PROVIDER CLASS:

PROVIDER TYPE: FULL TIME// REQUIRES COSIGNER:

REMARKS:

STREET ADDRESS 1: STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME):

OFFICE PHONE: (222) 222-2222// PHONE #3:

PHONE #4: FAX NUMBER: VOICE PAGER: DIGITAL PAGER: ROOM:

Select Provider:

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

At the “Select Provider” prompt, enter the same provider to verify the DEA # has been added. Expected Results

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

Provider: IARA,LANA E

DEA NUMBER: AI1234563 DEA NUMBER: AV5589532-AP1

DETOX NUMBER: DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020 EXPIRATION DATE: AUG 31, 2019

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES OFFICE PHONE: (222) 222-2222

NON-VA PRESCRIBER: TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES// DEA NUMBERS

1 - AI1234563 TEXAS

2 - AV5589532-AP1 ILLINOIS SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

**Scenario 2:**

When DEA number is found, ensure DEA # information is displayed for confirmation.

Expected Results

• “DOJ NAME”

• “VISTA NAME”

• First Name, Last Name

• Address 1

• Address 2

• Address 3

• City

• State

• Zip

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

From menu, select “Add NEW Providers” option.

Expected Results

Select Supervisor Functions <TEST ACCOUNT> Option: ADD NEW Providers Enter NEW PERSON's name (Family,Given Middle Suffix):

Edit Provider

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

At the prompt for ‘Enter NEW PERSON's name (Family,Given Middle Suffix):’, type a provider’s name and press Enter.

Expected Results

Provider: PAA,PHIL A

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

VA#: 11232

DEA NUMBER: AP2097663

DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCEDULE V: YES NON-VA PRESCRIBER:

TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - AP2097663 TEXAS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Type a DEA number and verify the following DEA # information is displayed for confirmation.

• “DOJ NAME”

• “VISTA NAME”

• First Name, Last Name

• Address 1

• Address 2

• Address 3

• City

• State

• Zip

Expected Results

DOJ NAME: HERTZ, BRIAN J VISTA NAME: PAA,PHIL A

The last names don't match.

Do you really want to continue? YES

WARNING: DEA# FORMAT MISMATCH -- CHECK SECOND LETTER Type <Enter> to continue:

**DEA NUMBER MANAGEMENT** Dec 12, 2018@00:47:33 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: HERTZ, BRIAN J HERTZ, BRIAN J

ADDRESS 1: LIMITED TO OFFICIAL FEDERAL D LIMITED TO OFFICIAL FEDERAL DU ADDRESS 2: HINES VA HOSPITAL HINES VA HOSPITAL

ADDRESS 3: 5000 SOUTH 5TH AVE 5000 SOUTH 5TH AVE CITY: HINES HINES

STATE: ILLINOIS ILLINOIS ZIP CODE: 601410000 601410000

ACTIVITY CODE: C0 C0

TYPE: INDIVIDUAL INDIVIDUAL DEA NUMBER: BH8946420 BH8946420

DETOX NUMBER:

EXPIRATION DATE: OCT 31, 2019 OCT 31, 2019

SCH II NARC: YES YES SCH II NON-NARC: YES YES SCH III NARC: YES YES SCH III NON-NARC: YES YES SCH IV: YES YES

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

‘Accept and Save’ or ‘Quit and Reject’.

Expected Results

Accepting will associate the information to the provider profile and Canceling will prompt option to reenter the DEA number. Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

**Scenario 3:**

Ensure that user can continue to add the DEA number information for **Non-VA providers** using vistA.

Expected Results

Verify that the selected Non-VA provider has the Provider Type field set to “C&A or FEE BASIS” in 200 file. (e.g.,Enter type of provider.

Choose from:

1 FULL TIME

2 PART TIME

3 C & A

4 FEE BASIS

5 HOUSE STAFF)

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

From menu, select “Add NEW Providers” option. Expected Results

Select Supervisor Functions <TEST ACCOUNT> Option: ADD NEW Providers Enter NEW PERSON's name (Family,Given Middle Suffix):

Edit Provider

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

At the prompt for ‘Enter NEW PERSON's name (Family,Given Middle Suffix):’, type a provider’s name and press Enter.

Expected Results

Select OPTION NAME: PSO PROV

1 PSO PROVIDER ADD Add New Providers

2 PSO PROVIDER EDIT Edit Provider

3 PSO PROVIDER INQUIRE View Provider CHOOSE 1-3: 2 PSO PROVIDER EDIT Edit Provider Edit Provider

Provider: LASTNAME,FIRSTNAME NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: C & A

REMARKS: testing Non-VA VA#: 12352

DEA NUMBER: XXNNNNNNN DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE V: YES

Type <Enter> to continue or '^' to exit:

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - XXNNNNNNN TEXAS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Type a DEA number and press Enter.

Expected Results

DOJ NAME: ERICKSON, CHRISTINE F MD VISTA NAME: LASTNAME,FIRSTNAME

The last names don't match.

Do you really want to continue? YES

WARNING: DEA# FORMAT MISMATCH -- CHECK SECOND LETTER Type <Enter> to continue:

**DEA NUMBER MANAGEMENT** Dec 11, 2018@17:40:26 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: ERICKSON, CHRISTINE F MD\*\*

ADDRESS 1: LIMITED TO OFFICIAL GOVERNMEN ADDRESS 2: 5000 S 5TH AVE\*\*

ADDRESS 3: EDWARD HINES JR VA HOSPITAL\*\* CITY: HINES\*\*

STATE: ILLINOIS\*\* ZIP CODE: 601413030\*\* ACTIVITY CODE: C0\*\*

TYPE: INDIVIDUAL\*\* DEA NUMBER: XXNNNNNNN\*\* DETOX NUMBER:

EXPIRATION DATE: AUG 31, 2021\*\* SCH II NARC: YES\*\*

SCH II NON-NARC: YES\*\* SCH III NARC: YES\*\* SCH III NON-NARC: YES\*\* SCH IV: YES\*\*

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Type C to ‘COPY DOJ/DEA VALUES TO VISTA’.

Expected Results

**DEA NUMBER MANAGEMENT** Dec 11, 2018@17:42 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE

|  |  |  |
| --- | --- | --- |
| NAME: | ERICKSON, CHRISTINE F MD | ERICKSON, CHRISTINE F MD |
| ADDRESS 1: | LIMITED TO OFFICIAL GOVERNME | N LIMITED TO OFFICIAL GOVERNMENT |
| ADDRESS 2: | 5000 S 5TH AVE | 5000 S 5TH AVE |
| ADDRESS 3: | EDWARD HINES JR VA HOSPITAL | EDWARD HINES JR VA HOSPITAL |
| CITY: | HINES | HINES |
| STATE: | ILLINOIS | ILLINOIS |

|  |  |  |
| --- | --- | --- |
| ZIP CODE: | 601413030 | 601413030 |
| ACTIVITY CODE: | C0 | C0 |
| TYPE: | INDIVIDUAL | INDIVIDUAL |
| DEA NUMBER: | XXNNNNNNN | XXNNNNNNN |
| DETOX NUMBER: |  |  |
| EXPIRATION DATE: | AUG 31, 2021 | AUG 31, 2021 |
| SCH II NARC: | YES | YES |
| SCH II NON-NARC: | YES | YES |
| SCH III NARC: | YES | YES |
| SCH III NON-NARC: | YES | YES |
| SCH IV: | YES | YES |

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE’ and exit using ‘^’.

Expected Results

USE FOR INPATIENT ORDERS

1 - XXNNNNNNN - YES

2 - XXNNNNNNN - NO

SELECT a DEA NUMBER to change the entry for INPATIENT USAGE:

VA#: 12352// 12352

INACTIVE DATE: PROVIDER CLASS: PROVIDER TYPE: C & A// REQUIRES COSIGNER:

REMARKS: testing Non-VA// STREET ADDRESS 1:

STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME): OFFICE PHONE: PHONE #3: PHONE #4:

FAX NUMBER: VOICE PAGER: DIGITAL PAGER: ROOM:

Select Provider:

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

From “VA #” prompt, press <enter> until “Select Provider” prompt is displayed.

Expected Results

INACTIVE DATE: PROVIDER CLASS:

PROVIDER TYPE: FULL TIME// REQUIRES COSIGNER:

REMARKS: testing // STREET ADDRESS 1: STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME): OFFICE PHONE: PHONE #3: PHONE #4:

FAX NUMBER: VOICE PAGER: DIGITAL PAGER:

Select Provider:

Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Enter the same provider toverify the DEA # has been added.

Expected Results

Provider: LASTNAME,FIRSTNAME

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: C & A

REMARKS: testing Non-VA VA#: 12352

DEA NUMBER: XXNNNNNNN DEA NUMBER: XXNNNNNNN DETOX NUMBER: DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020 EXPIRATION DATE: AUG 31, 2021

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES

SCHEDULE IV: YES SCHEDULE IV: YES SCHEDULE V: YES SCHEDULE V: YES

Type <Enter> to continue or '^' to exit: NON-VA PRESCRIBER: NO//

TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - XXNNNNNNN TEXAS

2 - XXNNNNNNN ILLINOIS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Attempt to delete an existing entry using the @ sign.

Expected Results

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.: @

Select a choice from the list for DELETION.: (1-2): 2

Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

At the prompt, ‘Select a choice from the list for DELETION:’ select DEA # to delete.

Expected Results

Removing the DEA number does not affect previously written prescriptions. DO YOU STILL WANT TO DELETE THIS DEA NUMBER?

Comments

Validates

Attachments

**Step 25**

**Execution Step**

Description\*

Type Yes and verify the selected DEA # has been deleted.

Expected Results

VA#: BI####// BI#### INACTIVE DATE: ^

Provider: LASTNAME,FIRSTNAME

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FEE BASIS

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. VA#: BI####

DEA NUMBER: BI####### DETOX NUMBER: XI####### EXPIRATION DATE: DEC 11, 2018

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE III NARCOTIC: NO SCHEDULE III NON-NARCOTIC: NO

SCHEDULE IV: YES SCHEDULE V: YES

STREET ADDRESS 1: 1515 ANY STREET APARTMENT 123

STREET ADDRESS 2: FLOOR 321 SECTION 120 WING 3

STREET ADDRESS 3: ADDRESS #3

CITY: EAST RIDGE STATE: TENNESSEE ZIP CODE: 37373

OFFICE PHONE: 423-531-4545 PHONE #3: 890-567-1234

PHONE #4: 980-123-4567 COMMERCIAL PHONE: 800-555-5555

FAX NUMBER: 800-444-4444 VOICE PAGER: 800-333-3333

DIGITAL PAGER: 800-222-2222

ROOM: 777A

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES// DEA NUMBERS

1 - BI####020 TENNESSEE Contains Detox # XI#######

Comments

Validates

Attachments

**Step 26**

**Execution Step**

Description\*

**Scenario 4:**

Ensure warning messages are displayed for the following:

a) DEA # is not found in the DEA file.

b) Second character and last name mismatch. c) DEA is in incorrect format.

d) DEA # is associated with another provider.

Expected Results

Comments

Validates

Attachments

**Step 27**

**Execution Step**

Description\*

From menu, select “Add NEW Providers” option.

Expected Results

Select Supervisor Functions <TEST ACCOUNT> Option: ADD NEW Providers Enter NEW PERSON's name (Family,Given Middle Suffix): Comments

Validates

Attachments

**Step 28**

**Execution Step**

Description\*

At the prompt for ‘Enter NEW PERSON's name (Family,Given Middle Suffix):’, type a provider’s name and press Enter.

Expected Results

Provider: LASTNAME,FIRSTNAME NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FEE BASIS

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. VA#: BI####

DEA NUMBER: BI####### DETOX NUMBER: XI#######

EXPIRATION DATE: JAN 01, 2020

SCHEDULE II NARCOTIC: NO SCHEDULE II NON-NARCOTIC: NO

SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE V: YES

STREET ADDRESS 1: 1515 ANY STREET APARTMENT 123

STREET ADDRESS 2: FLOOR 321 SECTION 120 WING 3

STREET ADDRESS 3: ADDRESS #3

CITY: EAST RIDGE STATE: TENNESSEE ZIP CODE: 37373

OFFICE PHONE: 423-531-4545 PHONE #3: 890-567-1234

PHONE #4: 980-123-4567 COMMERCIAL PHONE: 800-555-5555

FAX NUMBER: 800-444-4444 VOICE PAGER: 800-333-3333

DIGITAL PAGER: 800-222-2222

ROOM: 777A

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - BI####020 TENNESSEE Contains Detox # XI####### SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.: CI1956020

Comments

Validates

Attachments

**Step 29**

**Execution Step**

Description\*

Type a DEA # that is not in the DEA file and verify the following a warning message is displayed.

Expected Results

The following message will be presented on the screen:

“DEA number not found. Please enter the provider’s DEA # information.”

Comments

Validates

Attachments

**Step 30**

**Execution Step**

Description\*

Type a DEA # that does not match the second character of the provider’s last name and verify a warning message is displayed. Expected Results

The following warning message will be displayed:

“The DEA number doesn’t match provider’s last name. Please verify the information.”

Comments

Validates

Attachments

**Step 31**

**Execution Step**

Description\*

Type a DEA # in the incorrect format (e.g. AA####) and verify a warning message is displayed.

Expected Results

The following error message will be displayed and user will be prevented from continuing: “DEA number is invalid. Please check the number entered.”

Comments

Validates

Attachments

**Step 32**

**Execution Step**

Description\*

When the last name of the provider is different, display both names and verify a warning message is displayed confirming they want to continue.

Expected Results

“The last names don’t match." followed by a prompt: "Do you really want to continue?” will be displayed. Comments

Validates

Attachments

**Step 33**

**Execution Step**

Description\*

Enter a DEA # that is associated with another provider and verify an error message is displayed.

Expected Results

The following error message stating “Provider DEA number is already associated to another profile. Please check the number entered.” will be displayed.

Comments

Validates

Attachments

**Step 34**

**Execution Step**

Description\* End of test.

Expected Results

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**204642: CAS\_MPDU\_TS\_1.1.2.11 Edit DEA Number Information for Non- VA Providers in VistA**



Creation Date: Nov 20, 2018 5:46:54 PM (UTC-06:00) Last Modified: Mar 26, 2019 3:36:59 PM (UTC-05:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.11 Edit DEA Number Information for Non-VA Providers in VistA Description: 1. I want the ability to edit the following fields associated with a DEA number:

i. Detox Number

ii. Expiration Date

iii. Drug Schedule Authorizations

1. Schedule II - Y/N

2. Schedule IIn -Y/N

3. Schedule III - Y/N

4. Schedule IIIn -Y/N

5. Schedule IV - Y/N

6. Schedule V - Y/N

2. Upon saving my changes, I want the DEA number file updated to reflect my changes.

3. If the Pharmacy Operating Mode is set to “MBM”, I want to be allowed to edit DEA information regardless of PROVIDER TYPE.

4. If the Pharmacy Operating Mode is set to “VAMC”, I want to only be allowed to edit DEA information when the PROVIDER TYPE = FEE BASIS or when the PROVIDER TYPE = C&A.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\***

**Example: DEA # AA#######**

Expected Results

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

**Scenario 1:**Ensure that user can update the DEA number information for **Non-VA providers** using the VistA.

Expected Results

Verify that the selected Non-VA provider has the Provider Type field set to “C&A or FEE BASIS” in 200 file . (e.g., Enter type of provider.)

Choose from:

1 FULL TIME

2 PART TIME

3 C & A

4 FEE BASIS

5 HOUSE STAFF

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Log into VistA as a VA representative.

Expected Results

User will be taken to access/verify code prompts. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

From menu navigate to outpatient pharmacy>supervisor functions

From menu, select “EDIT PROVIDER” and enter a provider.

Expected Results

Supervisor Functions menu should display

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

From menu, select “EDIT PROVIDER” and enter a provider.

Expected Results

Provider: LASTNAME,FIRSTNAME AUTHORIZED TO WRITE MED ORDERS: YES

PROVIDER TYPE: C & A REMARKS: TESTING NON-VA VA#: 11232

DEA NUMBER: XXNNNNNN-11232 DEA NUMBER: XXNNNNNN DETOX NUMBER: DETOX NUMBER: XXNNNNNN EXPIRATION DATE: AUG 31, 2019 EXPIRATION DATE: OCT 30, 2019

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: NO SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: NO

SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES NON-VA PRESCRIBER:

TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - XXNNNNNN-11232 ILLINOIS

2 - XXNNNNNN ILLINOIS Contains Detox # XXNNNNNN

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.: 2

**DEA NUMBER MANAGEMENT** Dec 13, 2018@11:33:41 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL ALUE NAME: HERTZ, BRIAN J HERTZ, BRIAN J

ADDRESS 1: LIMITED TO OFFICIAL FEDERAL D LIMITED TO OFFICIAL FEDERAL DU ADDRESS 2: HINES VA HOSPITAL HINES VA HOSPITAL

ADDRESS 3: 5000 SOUTH 5TH AVE 5000 SOUTH 5TH AVE CITY: HINES HINES

STATE: ILLINOIS ILLINOIS ZIP CODE: 601410000 601410000

ACTIVITY CODE: C0 C0

TYPE: INDIVIDUAL INDIVIDUAL DEA NUMBER: XXNNNNNN XXNNNNNN DETOX NUMBER: \*\* XXNNNNNN EXPIRATION DATE: OCT 31, 2019\*\* OCT 30, 2019

SCH II NARC: YES\*\* NO SCH II NON-NARC: YES\*\* NO SCH III NARC: YES YES SCH III NON-NARC: YES YES SCH IV: YES YES

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen// E EDIT VISTA VALUES

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

At the “Select Item(s): Next Screen// E EDIT VISTA VALUES” prompt, select E to edit the fields associated with a

DEA #.

Note:(e.g. Detox #, Expiration Date, Schedules & etc).

Expected Results

DETOX: XXNNNNNN// PP1234563

DETOX NUMBER: XXNNNNNN already exists for this provider. Do you want to replace the existing DETOX number?

Enter Yes or No:? YES

EXPIRATION DATE: OCT 30, 2019// 102519 (OCT 25, 2019) SCHEDULE II NARCOTIC? NO//

SCHEDULE II NON-NARCOTIC? NO// YES SCHEDULE III NARCOTIC? YES// NO SCHEDULE III NON-NARCOTIC? YES// SCHEDULE IV? YES//

SCHEDULE V? YES//

Type <Enter> to continue or '^' to exit:

**DEA NUMBER MANAGEMENT** Dec 13, 2018@11:38:37 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: HERTZ, BRIAN J HERTZ, BRIAN J

ADDRESS 1: LIMITED TO OFFICIAL FEDERAL D LIMITED TO OFFICIAL FEDERAL DU ADDRESS 2: HINES VA HOSPITAL HINES VA HOSPITAL

ADDRESS 3: 5000 SOUTH 5TH AVE 5000 SOUTH 5TH AVE CITY: HINES HINES

STATE: ILLINOIS ILLINOIS ZIP CODE: 601410000 601410000

ACTIVITY CODE: C0 C0

TYPE: INDIVIDUAL INDIVIDUAL DEA NUMBER: XXNNNNNN XXNNNNNN DETOX NUMBER: \*\* PP1234563

EXPIRATION DATE: OCT 31, 2019\*\* OCT 25, 2019

SCH II NARC: YES\*\* NO SCH II NON-NARC: YES YES SCH III NARC: YES\*\* NO SCH III NON-NARC: YES YES SCH IV: YES YES

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Accept changes and verify the edited fields have been updated by selecting the same provider at the “Select Provider:” prompt.

Expected Results

Provider: LASTNAME,FIRSTNAME

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: C & A

REMARKS: TESTING NON-VA VA#: 11232

DEA NUMBER: XXNNNNNN-11232 DEA NUMBER: XXNNNNNN DETOX NUMBER: DETOX NUMBER: PP1234563

EXPIRATION DATE: AUG 31, 2019 EXPIRATION DATE: OCT 25, 2019

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: NO SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: NO SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES

SCHEDULE IV: YES SCHEDULE IV: YES SCHEDULE V: YES SCHEDULE V: YES

NON-VA PRESCRIBER:

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Navigate to Fileman and verify the changes have been updated and reflects in the DEA number file.

Note:

(Additional verification for internal purpose for user(s) who has FileMan access.)

Expected Results

The updated changes will be displayed.

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Log into your local VistA instance.

Expected Results

User will be taken to the access/verify code prompts.

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Navigate to the FileMan ‘Select OPTION prompt.

Expected Results

The ‘Select OPTION’ prompt is displayed. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Type INQ and then press Enter.

Expected Results

Select OPTION: INQUIRE TO FILE ENTRIES

Output from what File: DEA NUMBERS// (31 entries)

Select DEA NUMBERS: XXNNNNNN

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

At the “Select DEA NUMBERS:” prompt, enter the edited DEA # and verify the updated fields associated for the DEA # are displayed.

Expected Results

Another one:

Standard Captioned Output? Yes// (Yes)

Include COMPUTED fields: (N/Y/R/B): NO// - No record number (IEN), no Computed

Fields

DEA NUMBER: XXNNNNNN BUSINESS ACTIVITY CODE: C0

DETOX NUMBER: PP1234563 EXPIRATION DATE: OCT 25, 2019

USE FOR INPATIENT ORDERS?: YES TYPE: INDIVIDUAL

NAME (PROVIDER OR INSTITUTION): HERTZ, BRIAN J

STREET ADDRESS 1: LIMITED TO OFFICIAL FEDERAL DUTIES ONLY

STREET ADDRESS 2: HINES VA HOSPITAL STREET ADDRESS 3: 5000 SOUTH 5TH AVE CITY: HINES STATE: ILLINOIS

ZIP CODE: 601410000 SCHEDULE II NARCOTIC?: NO SCHEDULE II NON-NARCOTIC?: YES SCHEDULE III NARCOTIC?: NO SCHEDULE III NON-NARCOTIC?: YES SCHEDULE IV?: YES

SCHEDULE V?: YES LAST UPDATED BY: KHAN,TANIA LAST UPDATED DATE/TIME: DEC 13, 2018@11:39:28

LAST DOJ UPDATE DATE/TIME: DEC 11, 2018

Select DEA NUMBERS:

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\* End of test.

Expected Results

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**204643: CAS\_MPDU\_TS\_1.1.2.06 | Allow Multiple DEA Numbers on**



**Provider Profiles in VistA**

Creation Date: Nov 20, 2018 6:01:03 PM (UTC-06:00) Last Modified: Apr 15, 2019 11:58:38 AM (UTC-05:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.06 | Allow Multiple DEA Numbers on Provider Profiles in VistA Description: Allow Multiple DEA Numbers on Provider Profiles in VistA

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data.

Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\***

**\*\*\*This test script covers 1.1.2.24 | Allow Additional Letters as First Character of DEA #. \*\*\***

**Example: DEA # AA#######**

**The first character is either a "A", "B”, “F”, “G” or “M”.**

**Step 2**

**Execution Step**

Description\*

**Scenario 1:**The user can add multiple DEA numbers to a provider’s profile and each DEA number is associated with the following attributes.

**Note:**

**Select the prescriber who meets precondition #1.**

Expected Results

DEA Number

a. Detox Number

b. Institution or Individual

c. External Institution? Y/N

d. Address1 e. Address2 f. Address3 g. City

h. State i. Zip

j. Expiration Date

k. Drug Schedule Authorizations i. Schedule II - Y/N

ii. Schedule IIn -Y/N iii. Schedule III - Y/N iv. Schedule IIIn -Y/N v. Schedule IV - Y/N

vi. Schedule V - Y/N

l. ‘Use for Inpatient Orders?’ flag

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Log into VistA instance.

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

From menu select> core applications>outpatient pharmacy>supervisor functions

From menu, select ‘EDIT PROVIDER’ and enter a provider name.

Expected Results

Select Supervisor Functions <TEST ACCOUNT> Option: EDIT PROVIDER Select Provider:

Provider: LASTNAME,FIRSTNAME NON-VA PRESCRIBER: NO AUTHORIZED TO WRITE MED ORDERS: YES

PROVIDER TYPE: FULL TIME REMARKS: testing DEA NUMBER: XXNNNNNNN DETOX NUMBER: EXPIRATION DATE: MAY 31, 2020 SCHEDULE II NARCOTIC:

YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE V:

YES NON-VA PRESCRIBER: NO// TAX ID: EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST: AUTHORIZED TO WRITE MED ORDERS: YES// DEA NUMBERS 1 - XXNNNNNNN TEXAS SELECT an existing entry to edit, Type a DEA number (e.g., AA1234563) to begin a new entry, or type

'@' to delete an existing entry.: XXnnnnnnn

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Type a DEA number and press Enter.

Expected Results

DOJ NAME: ERICKSON, CHRISTINE F MD VISTA NAME: LASTNAME,FIRSTNAME

The last names don't match.

Do you really want to continue? yes YES

WARNING: DEA# FORMAT MISMATCH -- CHECK SECOND LETTER Type <Enter> to continue:

**DEA NUMBER MANAGEMENT** Dec 11, 2018@15:35:19 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: ERICKSON, CHRISTINE F MD\*\*

ADDRESS 1: LIMITED TO OFFICIAL GOVERNMEN ADDRESS 2: 5000 S 5TH AVE\*\*

ADDRESS 3: EDWARD HINES JR VA HOSPITAL\*\* CITY: HINES\*\*

STATE: ILLINOIS\*\* ZIP CODE: 601413030\*\* ACTIVITY CODE: C0\*\*

TYPE: INDIVIDUAL\*\* DEA NUMBER: XXNNNNNNN\*\* DETOX NUMBER:

EXPIRATION DATE: AUG 31, 2021\*\* SCH II NARC: YES\*\*

SCH II NON-NARC: YES\*\* SCH III NARC: YES\*\* SCH III NON-NARC: YES\*\*

SCH IV: YES\*\*

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Type C to ‘COPY DOJ/DEA VALUES TO VISTA’.

Expected Results

**DEA NUMBER MANAGEMENT** Dec 11, 2018@15:36:20 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: ERICKSON, CHRISTINE F MD ERICKSON, CHRISTINE F MD ADDRESS 1: LIMITED TO OFFICIAL GOVERNMEN LIMITED TO OFFICIAL GOVERNMENT ADDRESS 2: 5000 S 5TH AVE 5000 S 5TH AVE

ADDRESS 3: EDWARD HINES JR VA HOSPITAL EDWARD HINES JR VA HOSPITAL CITY: HINES HINES

STATE: ILLINOIS ILLINOIS ZIP CODE: 601413030 601413030

ACTIVITY CODE: C0 C0

TYPE: INDIVIDUAL INDIVIDUAL DEA NUMBER: XXNNNNNNN XXNNNNNNN DETOX NUMBER:

EXPIRATION DATE: AUG 31, 2021 AUG 31, 2021

SCH II NARC: YES YES SCH II NON-NARC: YES YES SCH III NARC: YES YES SCH III NON-NARC: YES YES SCH IV: YES YES

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE’.

Expected Results

USE FOR INPATIENT ORDERS

1 - XXNNNNNNN - YES

2 - XXNNNNNNN - NO

SELECT a DEA NUMBER to change the entry for INPATIENT USAGE:

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Select a DEA # to change the entry for ‘USE FOR INPATIENT ORDERS?’ and verify an error message is displayed.

Expected Results

“DEA # BI####### is already flagged as "Use for Inpatient Orders".

The previous DEA # will no longer be flagged as "Use for Inpatient Orders. Do you want to proceed with this change?”.

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Type ‘YES’ to set the “Use for Inpatients Orders” flag for the current DEA # and the “Use for Inpatient Orders?” flag on the previous DEA # is set to

‘NO’.

Expected Results

“DEA # XXNNNNNNN is already flagged as "Use for Inpatient Orders".

The previous DEA # will no longer be flagged as "Use for Inpatient Orders".Do you want to proceed with this change? YES//

XXNNNNNNN - NO XXNNNNNNN - YES

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

From “VA #” prompt, press <enter> until “Select Provider” prompt is displayed.

Expected Results

INACTIVE DATE: PROVIDER CLASS:

PROVIDER TYPE: FULL TIME// REQUIRES COSIGNER:

REMARKS: testing // STREET ADDRESS 1: STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME): OFFICE PHONE: PHONE #3: PHONE #4:

FAX NUMBER: VOICE PAGER: DIGITAL PAGER: Select Provider:

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Enter the same provider to verify the DEA # has been added.

Expected Results

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

REMARKS: testing

Provider: LASTNAME,FIRSTNAME

DEA NUMBER: XXNNNNNNN DEA NUMBER: XXNNNNNNN DETOX NUMBER: DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020 EXPIRATION DATE: AUG 31, 2021

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES NON-VA PRESCRIBER: NO//

TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES// DEA NUMBERS

1 - XXNNNNNNN TEXAS

2 - XXNNNNNNN ILLINOIS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Type a new DEA number and repeat steps 4-9.

Expected Results

DOJ NAME: EDWARD HINES JR VA HOSPITAL VISTA NAME: LASTNAME,FIRSTNAME

The last names don't match.

Do you really want to continue? YES

WARNING: DEA# FORMAT MISMATCH -- CHECK SECOND LETTER Type <Enter> to continue:

**DEA NUMBER MANAGEMENT** Dec 11, 2018@17:04:28 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: EDWARD HINES JR VA HOSPITAL\*\*

ADDRESS 1: VAMC-\*\*

ADDRESS 2: 5000 S 5TH AVE\*\*

ADDRESS 3: BLDG 200, ROOM B109 PHARMACY CITY: HINES\*\*

STATE: ILLINOIS\*\* ZIP CODE: 601410000\*\* ACTIVITY CODE: B5\*\*

TYPE: INSTITUTIONAL\*\* DEA NUMBER: XXNNNNNNN\*\* DETOX NUMBER:

EXPIRATION DATE: AUG 31, 2019\*\* SCH II NARC: YES\*\*

SCH II NON-NARC: YES\*\* SCH III NARC: YES\*\* SCH III NON-NARC: YES\*\* SCH IV: YES\*\*

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES Select Item(s): Next Screen// C COPY DOJ/DEA VALUES TO VISTA

DEA NUMBER MANAGEMENT Dec 11, 2018@17:04:31 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE

NAME: EDWARD HINES JR VA HOSPITAL EDWARD HINES JR VA HOSPITAL ADDRESS 1: VAMC- VAMC-

ADDRESS 2: 5000 S 5TH AVE 5000 S 5TH AVE

ADDRESS 3: BLDG 200, ROOM B109 PHARMACY BLDG 200, ROOM B109 PHARMACY S CITY: HINES HINES

STATE: ILLINOIS ILLINOIS ZIP CODE: 601410000 601410000

ACTIVITY CODE: B5 B5

TYPE: INSTITUTIONAL INSTITUTIONAL DEA NUMBER: XXNNNNNNN XXNNNNNNN DETOX NUMBER:

EXPIRATION DATE: AUG 31, 2019 AUG 31, 2019

SCH II NARC: YES YES SCH II NON-NARC: YES YES SCH III NARC: YES YES SCH III NON-NARC: YES YES SCH IV: YES YES

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES

E EDIT VISTA VALUES X QUIT AND REJECT CHANGES Select Item(s): Next Screen// A ACCEPT AND SAVE CHANGES

INDIVIDUAL DEA SUFFIX: TK1234

USE FOR INPATIENT ORDERS

1 - XXNNNNNNN - NO

2 - XXNNNNNNN - YES

SELECT a DEA NUMBER to change the entry for INPATIENT USAGE:

VA#:

INACTIVE DATE: PROVIDER CLASS:

PROVIDER TYPE: FULL TIME// REQUIRES COSIGNER:

REMARKS: testing // STREET ADDRESS 1: STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME): OFFICE PHONE: PHONE #3: PHONE #4:

FAX NUMBER: VOICE PAGER: DIGITAL PAGER: ROOM:

Select Provider:

Provider: LASTNAME,FIRSTNAME NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

REMARKS: testing

DEA NUMBER: XXNNNNNNN DEA NUMBER: XXNNNNNNN DETOX NUMBER: DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020 EXPIRATION DATE: AUG 31, 2021

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES

SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES

DEA NUMBER: XXNNNNNNN-TK1234

DETOX NUMBER:

EXPIRATION DATE: AUG 31, 2019

Type <Enter> to continue or '^' to exit: SCHEDULE II NARCOTIC: YES

SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE V: YES

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED:

DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - XXNNNNNNN TEXAS

2 - XXNNNNNNN ILLINOIS

3 - XXNNNNNNN-TK1234 ILLINOIS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

**Scenario 2:**Ensure that the user can add multiple DEA numbers to the profile of a provider who has a VA # but no

DEA #.

**Note:Select a prescriber who meets precondition #2.**

Expected Results

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

From menu, select ‘EDIT PROVIDER’, and enter a provider.

Expected Results

Provider: LASTNAME,FIRSTNAME

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

REMARKS: testing

VA#: 12352

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Type a DEA number and press Enter.

Expected Results

**DEA NUMBER MANAGEMENT Dec 11, 2018@17:17:21 Page: 1 of 2**

**NAME DOJ/DEA VALUE LOCAL VALUE NAME: LASTNAME,FIRSTNAME\*\***

**ADDRESS 1: 7900 MAIN STREET\*\* ADDRESS 2: ADDRESS STREET7322\*\* ADDRESS 3: ARRDESS STREET7323\*\* CITY: PLANO\*\***

**STATE: TEXAS\*\* ZIP CODE: 75025\*\* ACTIVITY CODE: C0\*\***

**TYPE: INDIVIDUAL\*\* DEA NUMBER: XXNNNNNNN\*\* DETOX NUMBER:**

**EXPIRATION DATE: MAY 31, 2020\*\* SCH II NARC: YES\*\***

**SCH II NON-NARC: YES\*\* SCH III NARC: YES\*\* SCH III NON-NARC: YES\*\* SCH IV: YES\*\***

**+ Enter ?? for more actions**

**C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES Select Item(s): Next Screen//**

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Type C to ‘COPY DOJ/DEA VALUES TO VISTA’.

Expected Results

**DEA NUMBER MANAGEMENT** Dec 11, 2018@17:17:59 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE

|  |  |  |
| --- | --- | --- |
| NAME: | LASTNAME,FIRSTNAME | LASTNAME,FIRSTNAME |
| ADDRESS 1: | 7900 MAIN STREET | 7900 MAIN STREET |
| ADDRESS 2: | ADDRESS STREET7322 | ADDRESS STREET7322 |
| ADDRESS 3: | ARRDESS STREET7323 | ARRDESS STREET7323 |
| CITY: | PLANO | PLANO |
| STATE: | TEXAS | TEXAS |
| ZIP CODE: | 75025 | 75025 |
| ACTIVITY CODE: | C0 | C0 |
| TYPE: | INDIVIDUAL | INDIVIDUAL |
| DEA NUMBER: | XXNNNNNNN | XXNNNNNNN |
| DETOX NUMBER: |  |  |
| EXPIRATION DATE: | MAY 31, 2020 | MAY 31, 2020 |
| SCH II NARC: | YES | YES |
| SCH II NON-NARC: | YES | YES |
| SCH III NARC: | YES | YES |
| SCH III NON-NARC: | YES | YES |
| SCH IV: | YES | YES |

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE’ and exit using ‘^’.

Expected Results

VA#: 12352//

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

From “VA #” prompt, press <enter> until “Select Provider” prompt is displayed.

Expected Results

INACTIVE DATE: PROVIDER CLASS:

PROVIDER TYPE: FULL TIME// REQUIRES COSIGNER:

REMARKS: testing // STREET ADDRESS 1: STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME): OFFICE PHONE: PHONE #3: PHONE #4:

FAX NUMBER: VOICE PAGER: DIGITAL PAGER:

Select Provider:

Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Enter the same provider toverify the DEA # has been added.

Expected Results

Provider: LASTNAME,FIRSTNAME NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

REMARKS: testing

VA#: 12352

DEA NUMBER: XXNNNNNNN DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE V: YES

Type <Enter> to continue or '^' to exit: NON-VA PRESCRIBER: NO//

TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - XXNNNNNNN TEXAS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

**Scenario 3:**Ensure that user can add Multiple DEA numbers for a **Non-VA**provider using the VistA.

**Note:Select a prescriber who meets precondition #3**

**Set Pharmacy Operating Mode to:**

• **“MBM” (for any provider type)**

• **“VAMC” (for FEE BASIS or C&A provider types only)**

See the steps below to setup Pharmacy Operating Mode (please see your site policy before changing)

*The Pharmacy setting can be changed by navigating to the ePCS DEA Utility Functions ... “[PSO EPCS UTILITY FUNCTIONS]” and selecting the below option(s):*

*“Select Systems Manager Menu <TEST ACCOUNT> Option: EPCS DEA Utility Functions*

*1 DEA Expiration Date Report*

*2 Print Prescribers with Privileges*

*3 Print DISUSER Prescribers with Privileges*

*4 Print PSDRPH Key Holders*

*5 Print Setting Parameters Privileges*

*6 Print Audits for Prescriber Editing*

*8 Changes to DEA Prescribing Privileges Report*

*9 Allocation Audit of PSDRPH Key Report*

*10 Enter/Edit EPCS Access Reports Parameters*

*11 Allow VA Number if DEA Number Expired*

*12 Set Pharmacy Operating Mode*

*13 Edit Facility DEA# and Expiration Date”*

*Upon selecting 12, the below prompt will display:*

*“Setting Set Pharmacy Operation Mode for System: NHML28.FO-BAYPINES.MED.VA.GOV*

*Value: VAMC//”*

*At the “Value” prompt, enter “MBM” if value is set to “VAMC” and vice-versa.*

Expected Results

Verify that the selected Non-VA provider has the Provider Type field set to “C&A or FEE BASIS” in 200 file.

(e.g., Enter type of provider.

Choose from:

1 FULL TIME

2 PART TIME

3 C & A

4 FEE BASIS

5 HOUSE STAFF)

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

From menu, select ‘EDIT PROVIDER’, and enter a provider.

Expected Results

Select OPTION NAME: PSO PROV

1 PSO PROVIDER ADD Add New Providers

2 PSO PROVIDER EDIT Edit Provider

3 PSO PROVIDER INQUIRE View Provider CHOOSE 1-3: 2 PSO PROVIDER EDIT Edit Provider Edit Provider

Provider: LASTNAME,FIRSTNAME NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: C & A

REMARKS: testing Non-VA VA#: 12352

DEA NUMBER: XXNNNNNNN DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE V: YES

Type <Enter> to continue or '^' to exit: NON-VA PRESCRIBER: NO//

TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - XXNNNNNNN TEXAS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Type a DEA number and press Enter.

Expected Results

DOJ NAME: ERICKSON, CHRISTINE F MD VISTA NAME: LASTNAME,FIRSTNAME

The last names don't match.

Do you really want to continue? YES

WARNING: DEA# FORMAT MISMATCH -- CHECK SECOND LETTER Type <Enter> to continue:

**DEA NUMBER MANAGEMENT** Dec 11, 2018@17:40:26 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: ERICKSON, CHRISTINE F MD\*\*

ADDRESS 1: LIMITED TO OFFICIAL GOVERNMEN ADDRESS 2: 5000 S 5TH AVE\*\*

ADDRESS 3: EDWARD HINES JR VA HOSPITAL\*\* CITY: HINES\*\*

STATE: ILLINOIS\*\* ZIP CODE: 601413030\*\* ACTIVITY CODE: C0\*\*

TYPE: INDIVIDUAL\*\* DEA NUMBER: XXNNNNNNN\*\* DETOX NUMBER:

EXPIRATION DATE: AUG 31, 2021\*\* SCH II NARC: YES\*\*

SCH II NON-NARC: YES\*\* SCH III NARC: YES\*\* SCH III NON-NARC: YES\*\* SCH IV: YES\*\*

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Type C to ‘COPY DOJ/DEA VALUES TO VISTA’.

Expected Results

**DEA NUMBER MANAGEMENT** Dec 11, 2018@17:42 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME: ERICKSON, CHRISTINE F MD ERICKSON, CHRISTINE F MD

ADDRESS 1: LIMITED TO OFFICIAL GOVERNMEN LIMITED TO OFFICIAL GOVERNMENT ADDRESS 2: 5000 S 5TH AVE 5000 S 5TH AVE

ADDRESS 3: EDWARD HINES JR VA HOSPITAL EDWARD HINES JR VA HOSPITAL CITY: HINES HINES

STATE: ILLINOIS ILLINOIS ZIP CODE: 601413030 601413030

ACTIVITY CODE: C0 C0

TYPE: INDIVIDUAL INDIVIDUAL DEA NUMBER: XXNNNNNNN XXNNNNNNN DETOX NUMBER:

EXPIRATION DATE: AUG 31, 2021 AUG 31, 2021

SCH II NARC: YES YES SCH II NON-NARC: YES YES SCH III NARC: YES YES SCH III NON-NARC: YES YES SCH IV: YES YES

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Select Item(s): Next Screen//

Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE’ and exit using ‘^’.

Expected Results

USE FOR INPATIENT ORDERS

1 - XXNNNNNNN - YES

2 - XXNNNNNNN - NO

SELECT a DEA NUMBER to change the entry for INPATIENT USAGE:

VA#: 12352// 12352

INACTIVE DATE: PROVIDER CLASS: PROVIDER TYPE: C & A// REQUIRES COSIGNER:

REMARKS: testing Non-VA// STREET ADDRESS 1:

STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME): OFFICE PHONE: PHONE #3: PHONE #4:

FAX NUMBER: VOICE PAGER: DIGITAL PAGER: ROOM:

Select Provider:

Comments

Validates

Attachments

**Step 25**

**Execution Step**

Description\*

From “VA #” prompt, press <enter> until “Select Provider” prompt is displayed.

Expected Results

INACTIVE DATE: PROVIDER CLASS:

PROVIDER TYPE: FULL TIME// REQUIRES COSIGNER:

REMARKS: testing // STREET ADDRESS 1: STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME): OFFICE PHONE: PHONE #3: PHONE #4:

FAX NUMBER: VOICE PAGER: DIGITAL PAGER:

Select Provider

Comments

Validates

Attachments

**Step 26**

**Execution Step**

Description\*

Enter the same provider to verify the DEA # has been added.

Expected Results

Provider: LASTNAME,FIRSTNAME

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: C & A

REMARKS: testing Non-VA VA#: 12352

DEA NUMBER: XXNNNNNNN DEA NUMBER: XXNNNNNNN DETOX NUMBER: DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020 EXPIRATION DATE: AUG 31, 2021

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES Type <Enter> to continue or '^' to exit:

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - XXNNNNNNN TEXAS

2 - XXNNNNNNN ILLINOIS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 27**

**Execution Step**

Description\*

Type an institutional DEA number and repeat steps 20-21.

Expected Results

DOJ NAME: EDWARD HINES JR VA HOSPITAL VISTA NAME: LASTNAME,FIRSTNAME

The last names don't match.

Do you really want to continue? YES

**DEA NUMBER MANAGEMENT** Dec 11, 2018@17:52:22 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE

|  |  |  |
| --- | --- | --- |
| NAME: | EDWARD HINES JR VA HOSPITAL | EDWARD HINES JR VA HOSPITAL |
| ADDRESS 1: | VAMC- | VAMC- |
| ADDRESS 2: | 5000 S 5TH AVE | 5000 S 5TH AVE |

|  |  |  |
| --- | --- | --- |
| ADDRESS 3: | BLDG 200, ROOM B109 PHARMACY | BLDG 200, ROOM B109 PHARMACY S |
| CITY: | HINES | HINES |
| STATE: | ILLINOIS | ILLINOIS |
| ZIP CODE: | 601410000 | 601410000 |
| ACTIVITY CODE: | B5 | B5 |
| TYPE: | INSTITUTIONAL | INSTITUTIONAL |
| DEA NUMBER: | XXNNNNNNN | XXNNNNNNN |
| DETOX NUMBER: |  |  |
| EXPIRATION DATE: | AUG 31, 2019 | AUG 31, 2019 |
| SCH II NARC: | YES | YES |
| SCH II NON-NARC: | YES | YES |
| SCH III NARC: | YES | YES |
| SCH III NON-NARC: | YES | YES |
| SCH IV: | YES | YES |

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES Select Item(s): Next Screen// A

INDIVIDUAL DEA SUFFIX: TAN123

USE FOR INPATIENT ORDERS

1 - XXNNNNNNN - YES

2 - XXNNNNNNN - NO

SELECT a DEA NUMBER to change the entry for INPATIENT USAGE:

VA#: 12352// 12352

INACTIVE DATE: PROVIDER CLASS: PROVIDER TYPE: C & A// REQUIRES COSIGNER:

REMARKS: testing Non-VA// STREET ADDRESS 1:

STREET ADDRESS 2: STREET ADDRESS 3: CITY:

STATE:

ZIP CODE: PHONE (HOME): OFFICE PHONE: PHONE #3: PHONE #4:

FAX NUMBER: VOICE PAGER: DIGITAL PAGER:

ROOM:

Select Provider:

Comments

Validates

Attachments

**Step 28**

**Execution Step**

Description\*

Enter the same provider to verify the institutional DEA # has been added.

Expected Results

Provider: LASTNAME,FIRSTNAME

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: C & A

REMARKS: testing Non-VA VA#: 12352

DEA NUMBER: XXNNNNNNN DEA NUMBER: XXNNNNNNN DETOX NUMBER: DETOX NUMBER:

EXPIRATION DATE: MAY 31, 2020 EXPIRATION DATE: AUG 31, 2021

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES

DEA NUMBER: XXNNNNNNN-TAN123

DETOX NUMBER:

Type <Enter> to continue or '^' to exit: EXPIRATION DATE: AUG 31, 2019

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE V: YES

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - XXNNNNNNN TEXAS

2 - XXNNNNNNN ILLINOIS

3 - XXNNNNNNN-TAN123 ILLINOIS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.:

Comments

Validates

Attachments

**Step 29**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**206017: CAS\_MPDU\_TS\_1.3.2.01 Block warning message in EPCS GUI**



**associated to providers without CPRS accounts for Meds by Mail users**

Creation Date: Nov 28, 2018 7:57:28 PM (UTC-06:00) Last Modified: Feb 6, 2019 7:54:02 PM (UTC-06:00) State: Draft

Originator: Khan, Tania (Accenture) Owner: Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.3.2.01 Block warning message in EPCS GUI associated to providers without CPRS accounts for Meds by Mail users

Description: As a Pharmacy Systems Manager, I want to turn off the warning message confirmation prompt associated with selecting a provider without a CPRS account for Meds by Mail sites running VistA as their pharmacy package so that I can eliminate unnecessary error/warning messages reducing message fatigue.

Must have access to VistA

Must have access to EPCS GUI

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

**Step 2**

**Information Step**

Description\*

**Scenario 1**: Ensure a new system level parameter allows user to identify a site as either a Medical Center or a Meds by Mail Site.

**Step 3**

**Execution Step**

Description\*

Log in to your VistA instance using user credentials.

Expected Results

The primary menu is displayed.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Navigate to new internal parameter “PSO VAMC MBM PHAMACY MODE” and verify the new external parameter is displayed with the default value of “VAMC”.

Expected Results

Setting Set Pharmacy Operation Mode for System:NHML28.FOBAYPINES.MED.VA.GOV Value: VAMC

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

At the “Value” prompt, enter “?” and press Enter.

Expected Results

Value: VAMC// ?

Pharmacy Operating Mode Selection, VAMC OR MBM.

Select one of the following: V VAMC

M MBM Value: VAMC//

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

At the “Value” prompt, enter “??” and verify a help text is displayed:

Expected Results

Expected Results

“Choose Pharmacy Operating Mode as VAMC to utilize business rules appropriate to the traditional VA pharmacy setting.

Choose Pharmacy Operating Mode as MBM to utilize business rules specific for the Meds by Mail pharmacy setting.” Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

At the prompt enter “^” to exit

Expected Results

User will be taken back to their primary menu. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

From primary menu, navigate to the “ePCS UTILITY FUNCTIONS” option and verify the new parameter is accessible.

Expected Results

Select Systems Manager Menu <TEST ACCOUNT> Option: EPCS DEA Utility Functions

1 DEA Expiration Date Report

2 Print Prescribers with Privileges

3 Print DISUSER Prescribers with Privileges

4 Print PSDRPH Key Holders

5 Print Setting Parameters Privileges

6 Print Audits for Prescriber Editing

8 Changes to DEA Prescribing Privileges Report

9 Allocation Audit of PSDRPH Key Report

10 Enter/Edit EPCS Access Reports Parameters

11 Allow VA Number if DEA Number Expired

12 Set Pharmacy Operating Mode

13 Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

At the “Select ePCS DEA Utility Functions <TEST ACCOUNT> Option:” prompt, type 12 to access the new parameter.

Expected Results

Setting Set Pharmacy Operation Mode for System: NHML28.FO-BAYPINES.MED.VA.GOV Value: VAMC//

Actions

At the “Value” prompt, enter “?” and press Enter. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\* Value: VAMC// ?

Expected Results

Pharmacy Operating Mode Selection, VAMC OR MBM.

Select one of the following: V VAMC

M MBM Value: VAMC//

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

At the “Value” prompt, enter “??” and verify a help text is displayed:

Expected Results

“Choose Pharmacy Operating Mode as VAMC to utilize business rules appropriate to the traditional VA pharmacy setting. Choose Pharmacy Operating Mode as MBM to utilize business rules specific for the Meds by Mail pharmacy setting.”

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

At the prompt select M for MBM and then press Enter.

Expected Results

The value is set to MBM. Comments

Validates

Attachments

**Step 13**

**Information Step**

Description\*

**Scenario 2**: Ensure the EPCS GUI can check the value of the new parameter and verify it can turn off the warning message confirmation prompt associated with

selecting a provider without a CPRS account

**Step 14**

**Execution Step**

Description\*

Log into EPCS GUI as a VA representative.

Expected Results

User will be taken to EPCS GUI screen

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Click on the Select Prescriber button located at the upper left side.

Expected Results

User will be displayed with “Look Up Utility” modal with the following functions: OK>button: prescriber will be selected

Cancel>button: user will be taken back to the EPCS GUI main page

More>button: will display additional search list

Find>button: to search specific provider (last, first)

Details> button: will display the “Provider Details” with the following info: Name

• Title

• DUZ

• Service/Section

• Mail Code

• Initials Remarks Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Select a prescriber without a CPRS account from the Look Up Utility window and verify a block warning message is not displayed.

Expected Results

The block warning message is not displayed.

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

At step 10 select VAMC and run the steps from 10 through 13.

Expected Results

The block warning message is displayed. End of test

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**207252: CAS\_MPDU\_1.1.2.15\_DEA Number Technical Description in**



**Data Dictionary**

Creation Date: Dec 10, 2018 2:31:08 PM (UTC-06:00) Last Modified: Mar 29, 2019 11:11:03 AM (UTC-05:00) State: Draft

Originator: Khan, Tania (Accenture) Owner: Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_1.1.2.15\_DEA Number Technical Description in Data Dictionary

Description:

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

Log into your local vista instance

Expected Results

**User will be taken to the access/verify code prompts**

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

From primary menu, navigate to the ‘**DATA DICTIONARY UTILITY OPTION’**

VA FileMan 22.2

Select OPTION: ??

Choose from:

1 ENTER OR EDIT FILE ENTRIES

2 PRINT FILE ENTRIES

3 SEARCH FILE ENTRIES

4 MODIFY FILE ATTRIBUTES

5 INQUIRE TO FILE ENTRIES

6 UTILITY FUNCTIONS

7 OTHER OPTIONS

8 DATA DICTIONARY UTILITIES

9 TRANSFER ENTRIES

Expected Results

**System will be prompted for ‘DATA DICTIONARY UTILITY OPTION:’**

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Type **‘LIST FILE ATTRIBUTES’**

Expected Results

**START WITH What File: DEA NUMBERS//**

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

At the prompt for ‘Select DEA NUMBERS’, Press Enter

Expected Results

START WITH What File: DEA NUMBERS// (1 entry)

GO TO What File: DEA NUMBERS//

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Press <Enter> until all the fields are displayed.

Expected Results

M

|  |  |  |
| --- | --- | --- |
| DEVICE: Linux Telnet/SSH |  | |
| STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE | 9/17/18 | PAGE 1 |
| STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTO | N.MED.VA.GOV | UCI: NH |
| L28,ROU | (VERSIO | N 8.0) |

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

8991.9,.01 DEA NUMBER 0;1 FREE TEXT (Required) INPUT TRANSFORM: K:'$$VALN2DEA^XUSER2(X) X

MAXIMUM LENGTH: 9

LAST EDITED: JUN 27, 2018

HELP-PROMPT: Enter the DEA number in

the format of 2 letters followed by 7 numbers.

DESCRIPTION: This field is used to enter the providers' Drug Enforcement Administration (DEA) number. Enter the

DEA number as two upper case letters followed by 7 digits. e.g., AA1234567.

TECHNICAL DESCR: This is the algorithm for the DEA number checking.

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 2

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

The first letter for practitioners (physicians, dentists, veterinarians, pharmacies etc.) is either an "A", "B", "F", or "G".

The second letter should be the first letter of the practitioner's last name. Sometimes this does not match if the registrant changed their name or the DEA did not get it correct the first time.

The check digit algorithm is as follows: AS1234563

1 + 3 + 5 = 9 2 + 4 + 6 = 12 x 2 = 24 9

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 3

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

+ 24 = 33

The last digit of the total must equal the

check digit (the last digit of the DEA number).

(33#10)=$E("AS1234563",9)

NOTES: XXXX--CAN'T BE ALTERED EXCEPT BY PROGRAMMER CROSS-REFERENCE: 8991.9^B

1)= S ^XTV(8991.9,"B",$E(X,1,30),DA)=""

2)= K ^XTV(8991.9,"B",$E(X,1,30),DA)

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 4

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

8991.9,.02 BUSINESS ACTIVITY CODE 0;2 POINTER TO DEA BUSINESS ACTIVITY CODES FILE (#8991.8)

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the Business Activity code given to this

DEA Number.

DESCRIPTION: This is the business activity code related to

this DEA Number.

8991.9,.03 DETOX NUMBER 0;3 FREE TEXT INPUT TRANSFORM: K:$L(X)>9!($L(X)<9) X

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 5

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

MAXIMUM LENGTH: 9

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the detox number

associated with this DEA

Number. Answer must be 9

characters in length.

DESCRIPTION: If the DEA provider has

detox privileges, this

field will be populated

with a 'VX' or 'XA'

followed by the numeric

portion of the DEA number.

8991.9,.04 EXPIRATION DATE 0;4 DATE

INPUT TRANSFORM: S %DT="EX" D ^%DT S X=Y K:Y<1 X

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 6

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

LAST EDITED: JUN 27, 2018

HELP-PROMPT: Enter the date this DEA Number

expires.

DESCRIPTION: This is the date of expiration

for the DEA Number.

8991.9,.05 DEA NUMBER SUFFIX 0;5 FREE TEXT INPUT TRANSFORM: K:$L(X)>4!($L(X)<1) X

MAXIMUM LENGTH: 4

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the DEA suffix for the person associated

with this DEA Number.

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 7

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

DESCRIPTION:

This is the suffix related to this DEA Number.

8991.9,.06 USE FOR INPATIENT ORDERS? 0;6 SET

'1' FOR YES;

'0' FOR NO;

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Can this DEA be used for inpatient orders?

Answer 'YES' or 'NO'.

DESCRIPTION: This field indicates whether or not this DEA

number can be used for inpatient orders.

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 8

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

8991.9,.07 TYPE 0;7 SET

'1' FOR INSTITUTIONAL;

'2' FOR INDIVIDUAL;

LAST EDITED: OCT 07, 2017

HELP-PROMPT: Enter the usage type for the DEA. The DEA usage

type may be 'Individual', or 'Institutional.

DESCRIPTION: This identifies whether the DEA number is an

individual DEA number or an Intuitional DEA

number.

8991.9,1.1 NAME (PROVIDER OR INSTITUTION) 1;1 FREE TEXT

INPUT TRANSFORM: K:$L(X)>40!($L(X)<1) X

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 9

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

MAXIMUM LENGTH: 40

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the name associated with this DEA Number.

Answer must be 1-40 characters in length.

DESCRIPTION: This is the name of the facility or person who

is associated with this DEA Number.

|  |  |  |
| --- | --- | --- |
| 8991.9,1.2 | STREET ADDRESS 1 | 1;2 FREE TEXT |
|  | INPUT TRANSFORM: | K:$L(X)>40!($L(X)<1) X |

MAXIMUM LENGTH: 40

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 10

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter street address line 1 for the given

person/institution. Answer must be 1-40

characters in length.

DESCRIPTION: This is the first line of the street address of

the permanent address of the person or

institution associated with this DEA Number.

8991.9,1.3 STREET ADDRESS 2 1;3 FREE TEXT INPUT TRANSFORM: K:$L(X)>40!($L(X)<1) X

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 11

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

MAXIMUM LENGTH: 40

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter street address line 2 for the given

person/institution. Answer must be 1-40

characters in length.

DESCRIPTION: This is the second line of the street address

of the permanent address of the person or

institution associated with this DEA Number.

8991.9,1.4 STREET ADDRESS 3 1;4 FREE TEXT INPUT TRANSFORM: K:$L(X)>40!($L(X)<1) X

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 12

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

MAXIMUM LENGTH: 40

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter street address line 3 for the given

person/institution. Answer must be 1-40

characters in length.

DESCRIPTION: This is the third line of the street address of

the permanent address of the person or

institution associated with this DEA Number.

|  |  |  |
| --- | --- | --- |
| 8991.9,1.5 | CITY | 1;5 FREE TEXT |
|  | INPUT TRANSFORM: | K:$L(X)>33!($L(X)<1) X |

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 13

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

MAXIMUM LENGTH: 33

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the city of the permanent address of the

person or institution associated with this DEA

Number. Answer must be 1-33 characters in

length.

DESCRIPTION: This is the city of the permanent address of

the person or institution related to this DEA

Number.

8991.9,1.6 STATE 1;6 POINTER TO STATE FILE (#5)

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 14

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the stat of the permanent address associated with thie person or institution associated with this DEA Number.

DESCRIPTION: This is the state of the permanent address of the person or institution associated with this DEA Number.

8991.9,1.7 ZIP CODE 1;7 FREE TEXT INPUT TRANSFORM: K:$L(X)>9!($L(X)<5) X

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 15

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

MAXIMUM LENGTH: 9

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the ZIP CODE or ZIP+4. Answer must be 5-9

characters in length.

DESCRIPTION: This is the postal ZIP code of the person or

institution associated with this DEA Number.

8991.9,2.1 SCHEDULE II NARCOTIC 2;1 SET

'1' FOR YES;

'0' FOR NO;

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 16

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

LAST EDITED: OCT 05, 2017

HELP-PROMPT: DEA number allows for schedule II drugs?

DESCRIPTION: This field is used to determine if the provider

has privileges for Schedule II drugs.

8991.9,2.2 SCHEDULE II NON-NARCOTIC 2;2 SET

'1' FOR YES;

'0' FOR NO;

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Provider has privileges for schedule II

non-narcotic?

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 17

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

DESCRIPTION: This field is used to determine if the provider has privileges for Schedule II non-narcotic.

8991.9,2.3 SCHEDULE III NARCOTIC 2;3 SET

'1' FOR YES;

'0' FOR NO;

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Provider has privileges for schedule III

narcotic?

DESCRIPTION: This field is used to determine if the provider

has privileges for Schedule II narcotic.

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 18

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

8991.9,2.4 SCHEDULE III NON-NARCOTIC 2;4 SET

'1' FOR YES;

'0' FOR NO;

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Provider has privileges for schedule III

non-narcotic?

DESCRIPTION: This field is used to determine if the provider

has privileges for Schedule III non-narcotic.

8991.9,2.5 SCHEDULE IV 2;5 SET

'1' FOR YES;

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 19

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

'0' FOR NO;

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Provider has privileges for schedule IV?

DESCRIPTION: This field is used to determine if the provider

has privileges for Schedule IV controlled

substances.

8991.9,2.6 SCHEDULE V 2;6 SET

'1' FOR YES;

'0' FOR NO;

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 20

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Provider has privileges for schedule V?

DESCRIPTION: This field is used to determine if the provider

has privileges for Schedule V controlled

substances.

8991.9,10.1 LAST UPDATED BY 10;1 POINTER TO NEW PERSON FILE (#200) LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the person who last updated this DEA

record.

DESCRIPTION: This is the person from the NEW PERSON file who

last initiated an update to this DEA record.

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 21

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

8991.9,10.2 LAST UPDATED DATE/TIME 10;2 DATE

INPUT TRANSFORM: S %DT="ESTX" D ^%DT S X=Y K:Y<1 X LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the date/time this DEA record was last updated.

DESCRIPTION: This is the date/time of the last update to this DEA record.

8991.9,10.3 LAST DOJ UPDATE DATE/TIME 10;3 DATE

INPUT TRANSFORM: S %DT="ESTX" D ^%DT S X=Y K:Y<1 X

STANDARD DATA DICTIONARY #8991.9 -- DEA NUMBERS FILE 9/17/18 PAGE 22

STORED IN ^XTV(8991.9, (1 ENTRY) SITE: TEST.NORTHAMPTON.MED.VA.GOV UCI: NHM

L28,ROU (VERSION 8.0)

|  |  |  |  |
| --- | --- | --- | --- |
| DATA | NAME | GLOBAL | DATA |
| ELEMENT | TITLE | LOCATION | TYPE |

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

LAST EDITED: OCT 05, 2017

HELP-PROMPT: Enter the date/time this DEA record was last

updated by the DOJ source.

DESCRIPTION: This is the date/time the DOJ (Department of

Justice) data was used to update this DEA record.

FILES POINTED TO FIELDS

DEA BUSINESS ACTIVITY CODES

(#8991.8) BUSINESS ACTIVITY CODE (#.02)

NEW PERSON (#200) LAST UPDATED BY (#10.1) STATE (#5) STATE (#1.6)

Select DATA DICTIONARY UTILITY OPTION:

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209150: CAS\_MPDU\_TS\_1.1.2.02\_Populate DEA # file from DOJ File**



Creation Date: Dec 26, 2018 2:43:30 PM (UTC-06:00) Last Modified: Apr 19, 2019 9:54:15 AM (UTC-05:00) State: Approved

Originator: Henderson, John (AbleVets LLC) Owner: Jampala, Pramod (FavorTech) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.02\_Populate DEA # file from DOJ File

Description: As a Pharmacy Systems Manager, verify the DEA file pulls information associated with DEA numbers from the DOJ file and record is created in DEA# file for each unique DEA number.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

• As of now the availability of the DOJ file is assumed as a manual process and hence cannot be tested. It is being used that the latest DOJ file is available in the Vista instance.

• This test case is designed for internal SQA only, it might require PG access and other things which cannot be simulated in UAT and other production test settings.

**Step 2**

**Information Step**

Description\*

**Pulling information from the DOJ File**

**Step 3**

**Execution Step**

Description\*

Use the following URL to retrieve information from the DOJ file.

http://vaauswebpbm801.aac.va.gov/dea-webservice-53/deaInfo/AJ2097663

**Note:**The highlighted text is where the DEA# of the provider needs to be replaced**.**

Expected Results

The browser prompts to Open or Save the file.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Use the Open option and select Notepad or Wordpad when the system prompts for the application.

Expected Results

The Wordpad opens the information and the provider information is displayed. Save this text file.

Example: {"businessActivityCode":"C","businessActivitySubcode":"1","name":"JAMPALA, PRAMOD","address1": "1122 pine dr","address2":"test2","address3":"test3","city":"OKLAHOMA","state":"OK","expirationDate": "20200101","drugSchedule":"22N33N451","processedDate":"test","deaNumber":"AJ2097663","zipCode":"73104"}

Note: The Detox # and the schedule information are not pulled from the DOJ file and hence will not be verified in this test case.

Comments

Validates

Attachments

**Step 5**

**Information Step**

Description\*

**Verify in Vista that the information is available in the DEA# file. Spot check and verify the migrated data.**

**Step 6**

**Execution Step**

Description\*

Log in to your VistA instance using user credentials.

Expected Results

The primary VistA menu is displayed. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Navigate to FM VA FileMan menu.

Expected Results

FileMan menu is displayed. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Select the Inquire to File Entries option.

Expected Results

The “Output from what File:” prompt is displayed. Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Enter the DEA NUMBERS (8991.9) and then press Enter.

Expected Results

The “Select DEA NUMBERS:” prompt is displayed. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Enter the DEA# number used in Step 1 and then press Enter.

Expected Results

The “Another one:” prompt is displayed. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The “Standard Captioned Output? Yes//” prompt is displayed. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The “Include COMPUTED fields: (N/Y/R/B):” prompt is displayed. Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The provider information is displayed on the screen. Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Compare the values saved at Step 2 and the values displayed at Step 10. Also verify that these fields are populated.

i. DEA Number, Detox Number

ii.Expiration Date

iiiN. ame (Provider or Institution)

ivA. ddress1

v.Address2

viA. ddress3

viCi. ity, State, and Zip

viBii.usiness Type

ixB. usiness Subtype

x.Drug Schedule Authorizations

1.Schedule II - Y/N

2.Schedule IIn -Y/N

3.Schedule III - Y/N

4.Schedule IIIn -Y/N

5.Schedule IV - Y/N

6.Schedule V - Y/N

xiU. se for Inpatient Orders? – Y/N

Note: If the schedules were prepopulated in the File 200 for a provider, the DEA Numbers file gets the information from

File 200 regardless of what DOJ webservices say.

Expected Results

Values are populated.

Comments

Validates

Attachments

**Step 15**

**Information Step**

Description\*

**Record created in DEA# file for each unique DEA number, we are creating 2 extracts and comparing the records and verify that all the required records migrated from File # 200 to 8991.9 or they were logged in the migration exception log.**

**Step 16**

**Execution Step**

Description\*

Navigate to FM FileMan menu.

Expected Results

The “Select VA FileMan <TEST ACCOUNT> Option:” prompt is displayed. Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Select the Search File Entries option and then Enter.

Expected Results

The “Output from what File:” prompt is displayed.

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Enter 200 and then press Enter.

Expected Results

Search query input is displayed. Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Enter the following query and then press Enter**.**

Output from what File: NEW PERSON// (100885 entries)

-A- SEARCH FOR NEW PERSON FIELD: DEA#

-A- CONDITION: 'NULL

-B- SEARCH FOR NEW PERSON FIELD: IF: A// DEA# NOT NULL

STORE RESULTS OF SEARCH IN TEMPLATE: Sort by: NAME//

Start with NAME: FIRST// First Print FIELD: NAME

1 NAME

2 NAME COMPONENTS CHOOSE 1-2: 1 NAME

Then Print FIELD: DEA# Then Print FIELD:

Heading (S/C): NEW PERSON Search// DEVICE: HOME;80;9999

Expected Results

The query is run and all the records which have a DEA# populated in file 200 are displayed on the screen and at the end says “NNN MATCHES FOUND.”

Note the NNN or store the entire output in a text editor.

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Navigate back to FM menu and then select the Search File Entries option.

Expected Results

The “Output from what File:” prompt is displayed. Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Enter 8991.9 and then press Enter.

Expected Results

Search query input is displayed. Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Enter the following query and then press Enter**.**

Output from what File: DEA NUMBERS// (18 entries)

-A- SEARCH FOR DEA NUMBERS FIELD: DEA NUMB

1 DEA NUMBER

2 DEA NUMBER SUFFIX CHOOSE 1-2: 1 DEA NUMBER

-A- CONDITION: 'NULL

-B- SEARCH FOR DEA NUMBERS FIELD: IF: A// DEA NUMBER NOT NULL

STORE RESULTS OF SEARCH IN TEMPLATE:

Sort by: DEA NUMBER// NAME (PROVIDER OR INSTITUTION) Start with NAME (PROVIDER OR INSTITUTION): FIRST//

Within NAME (PROVIDER OR INSTITUTION), Sort by: First Print FIELD: NAME (PROVIDER OR INSTITUTION) Then Print FIELD: DEA NUMBER

1 DEA NUMBER

2 DEA NUMBER SUFFIX CHOOSE 1-2: 1 DEA NUMBER Then Print FIELD:

Heading (S/C): DEA NUMBERS Search//

DEVICE: HOME;132;9999

Expected Results

The query is run and all the records which have a DEA# populated in file 8991.9 displayed on the screen and at the end says “NNN MATCHES FOUND.”

Note the NNN or store the entire output in a text editor.

Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Compare the results noted in Step 15 and Step 18. Expected Results

The number of DEA#s found in 8991.9 could possibly be less than the numbers found in File 200. The exceptions

for DEA#s during migration (during installation of the patch) are logged in the migration log.

A mismatch of DEA# obtained from DOJ WebService will be logged in the migration log. Get the numbers of all such exceptions. The Detox exceptions should be ignored, since they are migrated even though they caused an exception.

Adding the DEA exceptions from the migration log to the numbers from Step 18 should give you the total DEA#s from

Step 15, which verifies that a unique record was created in the new DEA#s file for each unique DEA#.

Comments

Validates

Attachments

**Step 24**

**Information Step**

Description\*

**Migration exception log**

**Step 25**

**Execution Step**

Description\*

Navigate to mail man and open the exception log.

Expected Results

Migration exception log is found. Comments

Validates

Attachments

**Step 26**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209172: CAS\_MPDU\_TS\_1.1.2.10 | Add DEA Number Information for VA Providers in the EPCS GUI**



Creation Date: Dec 26, 2018 4:00:36 PM (UTC-06:00) Last Modified: Apr 19, 2019 9:54:58 AM (UTC-05:00) State: Draft

Originator: Henderson, John (AbleVets LLC) Owner: Khan, Tania (Accenture)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.10 | Add DEA Number Information for VA Providers in the EPCS GUI Description: Add DEA number(s) for VA providers using the EPCS GUI.

1. If provider doesn’t have a DEA number added, then the Prescriber DEA # field will be defaulted with “Add new DEA #”

2. If provider has a DEA number added, then Prescriber DEA # field will be displayed with the default DEA number.

3. If provider has an Institutional DEA number added.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\* Example: DEA # AA#######**

**Step 2**

**Information Step**

Description\*

**Scenario 1:**

If provider doesn’t have a DEA number added, then the Prescriber DEA # field will be defaulted with “Add new DEA #”

**Step 3**

**Execution Step**

Description\*

Log into EPCS GUI

Expected Results

User will be taken to EPCS GUI screen

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side

Expected Results

User will be displayed with “**Look Up Utility**” modal with the following functions: OK>button: prescriber will be selected

Cancel>button: user will be taken back to the EPCS GUI main page

More>button: will display additional search list

Find>button: to search specific provider (last, first)

Details> button: will display the “Provider Details” with the following info:

• Name

• Title

• DUZ

• Service/Section

• Mail Code

• Initials

• Remarks

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Select a prescriber from the Look Up Utility list and click OK button.

Expected Results

User will be taken back to the EPCS GUI screen with “Add new DEA #” as default in Prescriber DEA # field.

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Enter a new DEA number in the Current/New DEA number field.

Expected Results

User will be able to type a new DEA number in the Current/New DEA number field.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Enter a valid DEA number and click the “Copy” button.

Expected Results

The system will automatically search for a matching DEA number in the DOJ file and the following information will be displayed in the “DOJ” column for confirmation:

• Last Name, Firstname

• Address 1

• Address 2

• Address 3

• City, State, and Zip

•

Month, Day, Year (Prescriber DEA Expiration Date)

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Click the **Add** button to add a DEA number.

Expected Results

A dialog box will display with the following information:

• “Data Entry for e-Prescribing Controlled Substances Information”-Title

• “(i) DEA # added and now selectable from the Prescriber DEA # dropdown list.” -message

• OK-button

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Click the OK button and verify the **Prescriber DEA #** field has the DEA number added.

Expected Results

The **Prescriber DEA #** field is populated with the added DEA number.

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Repeat steps 1-4 and set the Prescriber DEA # field to “<Add new DEA #>”.

Expected Results

User will be able to type a new DEA number in the Current/New DEA number field.

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Enter a valid DEA number with different second character of the provider’s last name (e.g. FL) and click the “Copy” button.

Expected Results

The user will be displayed with the following error message: ***“The DEA number doesn’t match provider’s last name. Please verify the information.”***

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Enter a “Individual” type DEA number which is associated with another Provider and click on “Copy” button.

Expected Results

User will be displayed with an error message stating ***“Provider DEA is already associated to another Profile. Please check the number entered.”***

Displaying for the following message:

“AA####### is associated with Provider (lastname,firstname). Last names do not match. Do you wish to continue?

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Enter a DEA number in the incorrect format (e.g. five numbers AA#####) instead of seven numbers.

Expected Results

User will be displayed with the following message on the screen:

***“DEA number is invalid. Please check the number entered.”***

Current message displays: “Enter the DEA number in the format of 2 letters followed by 7 numbers”.

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Select the checkbox for “Inpatient Orders”.

Expected Results

User will be prevented from setting “Inpatient Orders” to “N” if there is only one DEA number. The following dialog box will display:

• Data Entry for e-Prescribing Controlled Substances Error-Title

• DEA# is the only one and must remain selected-Message

• OK-button

Comments

Validates

Attachments

**Step 15**

**Information Step**

Description\*

**Scenario 2:**

If provider has a DEA number added, then Prescriber DEA # field will be displayed with the default DEA number.

**Step 16**

**Execution Step**

Description\*

Log into EPCS GUI.

Expected Results

User will be taken to EPCS GUI screen.

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side.

Expected Results

User will be displayed with “**Look up Utility**” modal with the following functions: OK>button: prescriber will be selected

Cancel>button: user will be taken back to the EPCS GUI main page

More>button: will display additional search list

Find>button: to search specific provider (last, first)

Details> button: will display the “Provider Details” with the following info:

• Name

• Title

• DUZ

• Service/Section

• Mail Code

• Initials

• Remarks

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Select a prescriber from the Look up utility list and click OK button.

Expected Results

User will be taken back to the EPCS GUI screen with value of “DEA #” as default in Prescriber DEA # field.

Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Click on the dropdown to add a new DEA number.

Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number

• < Add new DEA # >

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Select < Add new DEA # > from the dropdown.

Expected Results

The “Current/New DEA #” field is editable.

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Enter a new DEA number in the Current/New DEA number field.

Expected Results

User will be able to type a new DEA number in the Current/New DEA number field.

Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Enter a valid DEA number and click the “Copy” button.

Expected Results

The system will automatically search for a matching DEA number and the following DEA information will be displayed for confirmation:

• Lastname, Firstname Last Name

• Address 1

• Address 2

• Address 3

• City, State, and Zip.

Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Click the **Add** button to add a DEA number.

Expected Results

A dialog box will display with the following information:

• “Data Entry for e-Prescribing Controlled Substances Information”-Title

• “(i) DEA # added and now selectable from the Prescriber DEA # dropdown list.” -message

• OK-button

Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

Verify the Prescriber DEA # field has the DEA number added.

Expected Results

After entering a 2nd DEA#, the Prescriber DEA # field will show the older one. You must click the drop-down to see the new one.

Comments

Validates

Attachments

**Step 25**

**Execution Step**

Description\*

Click on the dropdown to add a new DEA number.

Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number

• AB#######-New DEA number

• < Add new DEA # >

Comments

Validates

Attachments

**Step 26**

**Execution Step**

Description\*

Select checkbox to set the DEA number to “Y” or “N” for “Inpatient Orders”. Note: Need another DEA to be added for this .

Expected Results

User should be able to select the checkbox for “Inpatient Orders”.

Comments

Validates

Attachments

**Step 27**

**Information Step**

Description\*

**Scenario 3:**

If provider has an Institutional DEA number added, then the suffix field will be enabled.

**Step 28**

**Execution Step**

Description\*

Log into EPCS GUI

Expected Results

User will be taken to EPCS GUI screen.

Comments

Validates

Attachments

**Step 29**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side.

Expected Results

User will be displayed with “**Look Up Utility**” modal with the following functions: OK>button: prescriber will be selected

Cancel>button: user will be taken back to the EPCS GUI main page

More>button: will display additional search list

Find>button: to search specific provider (last, first)

Details> button: will display the “Provider Details” with the following info: Name

• Title

• DUZ

• Service/Section

• Mail Code

• Initials

• Remarks

Comments

Validates

Attachments

**Step 30**

**Execution Step**

Description\*

Select a prescriber from the Look Up Utility list and click OK button.

Expected Results

User will be taken back to the EPCS GUI screen with value of “DEA #” as default in Prescriber DEA # field.

Comments

Validates

Attachments

**Step 31**

**Execution Step**

Description\*

Click on the dropdown to add an Institutional DEA number.

Expected Results

User will be displayed with two selectable(s):

• AA#######-Current DEA number (e.g)

• <Add new DEA#> Comments

Validates

Attachments

**Step 32**

**Execution Step**

Description\*

Select < Add new DEA # > from the dropdown.

Expected Results

The “Current/New DEA #” field is editable.

Comments

Validates

Attachments

**Step 33**

**Execution Step**

Description\*

Enter an Institutional DEA number in the Current/New DEA number field.

Expected Results

User will be able to type a new DEA number in the Current/New DEA number field.

Comments

Validates

Attachments

**Step 34**

**Execution Step**

Description\*

Enter a valid Institutional DEA number and click the “Copy” button.

Expected Results

A dialog box will display with the following information:

• “Data Entry for e-Prescribing Controlled Substances Inquiry” (title)

• DOJ Name: (facility name)

• Vista Name: Last, First

• The names don’t match as this is an institutional DEA #. (message)

• Do you really want to continue?

• Yes/No buttons

Comments

Validates

Attachments

**Step 35**

**Execution Step**

Description\*

Click Yes and verify the DEA information is displayed in the DOJ column.

Expected Results

The system will automatically search for a matching Institutional DEA number and the following DEA information will be displayed in the DOJ column for confirmation:

• First Name, Last Name,

• Address 1,

• Address 2,

• Address 3,

• City, State, and Zip.

Comments

Validates

Attachments

**Step 36**

**Execution Step**

Description\*

Click the **Add** button and attempt to add an Institutional DEA number without a Unique Suffix.

Expected Results

A dialog box will display with the following error message:

• “Data Entry for e-Prescribing Controlled Substances Error”-Title

• “As this is an institutional DEA number, you must enter a unique Suffix for New DEA # between 3 and 10 characters in length.” -message

• Ok-button

Comments

Validates

Attachments

**Step 37**

**Execution Step**

Description\*

Click the OK button and add a unique Suffix in the “Suffix for New DEA #” field.

Expected Results

User will be able to type a unique Suffix in the “Suffix for New DEA #” field.

Comments

Validates

Attachments

**Step 38**

**Execution Step**

Description\*

Click the **Add** button and attempt to add an Institutional DEA number.

Expected Results

A dialog box will display with the following information:

• ‘Data Entry for e-Prescribing Controlled Substances Information’ (title)

• ‘DEA # added and now selectable from the Prescriber DEA # dropdown list.’ (message)

• OK’ (button)

Comments

Validates

Attachments

**Step 39**

**Execution Step**

Description\*

Click the ‘OK’ button and verify the Institutional DEA # has been added in the dropdown list.

Note: After entering a 2nd DEA/institutional #, the Prescriber DEA # field shows an older one. You must click the drop-down to see the new one.

Expected Results

The institutional DEA # will be added in the dropdown list.

Comments

Validates

Attachments

**Step 40**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209239: CAS\_MPDU\_TS\_1.1.2.20 | Ensure that one DEA Number is**



**Flagged for Inpatient Orders in the EPCS GUI**

Creation Date: Dec 27, 2018 1:27:13 PM (UTC-06:00) Last Modified: Mar 22, 2019 9:10:25 AM (UTC-05:00) State: Approved

Originator: Henderson, John (AbleVets LLC) Owner: Khan, Tania (Accenture) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.20 | Ensure that one DEA Number is Flagged for Inpatient Orders in the EPCS GUI Description: Ensure that one DEA Number is Flagged for Inpatient Orders in the EPCS GUI

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\***

**Step 2**

**Information Step**

Description\*

**Scenario 1:**If the provider’s profile only has one DEA # or adding a new DEA # as first entry, then the “Use for Inpatient

Orders?” flag will automatically be set to “Y” and will not be cleared.

**Step 3**

**Execution Step**

Description\*

Log into EPCS GUI.

Expected Results

User will be taken to EPCS GUI screen.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Click on the **Select Prescriber** button located at the upper left side.

Expected Results

User will be displayed with “**Look up Utility**” modal with the list of providers with provider’s title next to it on the left side and the following functions on the right.

• **OK**>button: prescriber will be selected

• **Cancel**>button: user will be taken back to the EPCS GUI main page

• **More**>button: will display additional search list

• **Find**>button: to search specific provider (last, first)

• **Details**> button: will display the “Provider Details” window.

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Select a prescriber from the Look Up Utility list and click OK button.

Expected Results

User will be taken back to the EPCS GUI screen with “Add new DEA #” as default in Prescriber DEA # field. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Enter a new DEA number in the Current/New DEA number field.

Expected Results

User will be able to type a new DEA number in the Current/New DEA number field. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Enter a valid DEA number and click the “Copy” button. Expected Results

The system will automatically search for a matching DEA number and the following DEA information will be

displayed for confirmation:

• Lastname, Firstname

• Address 1

• Address 2

• Address 3

• City, State, and Zip.

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Click the **Add** button to add a DEA number.

Expected Results

A dialog box will display with the following information:

• “Data Entry for e-Prescribing Controlled Substances Information”-Title

• “(i) DEA # added and now selectable from the Prescriber DEA # dropdown list.” -message

• OK-button

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Verify the Prescriber DEA # field has the DEA number added and the checkbox for “Inpatient Orders” is checked and grayed out.

Note: Applies to provider’s profile with one DEA # or adding a new DEA # as first entry.

Expected Results

The checkbox for “Inpatient Orders” will be checked and grayed out.

Comments

Validates

Attachments

**Step 10**

**Information Step**

Description\*

**Scenario 2:**If the provider has multiple DEA #s, then the provider can select and edit the “Use for Inpatient

Orders?” checkbox.

**Note:**(As a default, the first DEA number is set for inpatient orders and when you have more than one then user can change to select the second DEA number).

**Step 11**

**Execution Step**

Description\*

Select a prescriber from the Look Up Utility list with multiple DEA #s and click the “OK” button.

Expected Results

User will be taken back to the EPCS GUI screen with value of “DEA #” as default in Prescriber DEA # field. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Uncheck the “Use for Inpatient Orders?” and click the Update button.

Expected Results

An **Information** window will be displayed with “OK” button.

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Click the ‘OK’ button and verify an error message “Current provider does not have a DEA # with a ‘Use for Inpatient Order’. Select a DEA # and then check the ‘Use for Inpatient Orders’” is displayed at the bottom of the screen.

Expected Results

User will be taken back to ePCS GUI screen with an error message at the bottom of the screen.

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Select the 2nd DEA # from the dropdown and check mark the “Use for Inpatient Orders?” checkbox then click the Update button. Expected Results

User should be able to select the checkbox for “Inpatient Orders”.

Comments

Validates

Attachments

**Step 15**

**Information Step**

Description\*

**Scenario 3:**If provider’s profile has more than one DEA # and already has the “Use for Inpatient Orders?” flag to “Y”, then an error message will display and will only allow one DEA to have the “Use for Inpatient Orders?” **Note:**(As a default, the first DEA number is set for inpatient orders and when you have more than one then user can change to select the second DEA number).

**Step 16**

**Execution Step**

Description\*

Select a prescriber from the Look Up Utility list with multiple DEA #s and click the “OK” button.

Expected Results

User will be taken back to the EPCS GUI screen with value of “DEA #” as default in Prescriber DEA # field. Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Select a DEA # from the dropdown and attempt to set the “Use for Inpatient Orders?” flag to “Y”. Expected Results

A new window with the following error message and functions will be displayed:

• “DEA# nnnnn is already flagged as “Use for Inpatient Order?”. Do you want to proceed with this change? The previous DEA # will no longer be flagged as “Use for Inpatient Orders?” (message)

• Yes (button)

• No (button)

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Select the ok button and verify no changes are made to the “Use for Inpatient Orders?” flag, and the checkbox should be cleared.

Expected Results

No changes will be made and the “Use for Inpatient Orders?” checkbox will be cleared. Comments

Validates

Attachments

**Step 19**

**Information Step**

Description\*

**Scenario 4:**

If the provider’s profile already has the “Use for Inpatient Orders?” flag set to “Y” on another DEA #, then an error message will display.

**Note:**(As a default, the first DEA number is set for inpatient orders and when you have more than one then user can change to select the second DEA number).

**Step 20**

**Execution Step**

Description\*

Select a prescriber from the Look Up Utility list and click OK button.

Expected Results

User will be taken back to the EPCS GUI screen with value of “DEA #” as default in Prescriber DEA # field. Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Uncheck the “Use for Inpatient Orders?” and verify an error message is displayed.

Expected Results

A new window with the following error message and functions will be displayed: Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Select the OK button and verify no changes are made to the “Use for Inpatient Orders?” flag, and the checkbox should be cleared.

Expected Results

No changes will be made and the “Use for Inpatient Orders?” checkbox will be cleared. Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Now add new valid DEA # to user profile. Uncheck the “Use for Inpatient Orders?” flag from DEA # which was already exited on provider profile and verify the error message.

Expected Results

The error message appears and the user can’t leave a profile w/o at least 1 DEA # on profile selected. Comments

Validates

Attachments

**Step 24**

**Information Step**

Description\* End of test.

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209497: CAS\_MPDU\_TS\_1.1.2.17 | Confirm DEA number information updates on provider profile.**



Creation Date: Jan 2, 2019 1:59:36 PM (UTC-06:00) Last Modified: Mar 27, 2019 8:11:55 AM (UTC-05:00) State: Approved

Originator: Henderson, John (AbleVets LLC) Owner: Gupta, Poonam (AbleVets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.17 | Confirm DEA number information updates on provider profile. Description: Confirm DEA number information updates on provider profile.

User must have access to VistA Provider scenarios:

1. VA provider with DEA# -- DEA# only.

2. VA provider with VA# -- has no DEA.

3. Non-VA provider with DEA#.

4. VA and Non-VA providers with Institutional DEA #.

Set Pharmacy Operating Mode to: PSO VAMC

• “MBM” (for any provider type)

• “VAMC” (for FEE BASIS or C&A provider types only)

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values\*\*\***

**Example: DEA # AA#######**

**Step 2**

**Information Step**

Description\*

**Scenario 1:** The user can change andconfirm updates to providers’ DEA information and upon accessing the provider profile, user will be shown \*\* to indicate the differences.

**Note: Select the prescriber who meets precondition #1.**

**Step 3**

**Execution Step**

Description\*

Log into VistA instance.

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

From menu > outpatient pharmacy manger menu> supervisor functions

From menu, select ‘EDIT PROVIDER’ and enter a provider name.

Expected Results

Select Supervisor Functions <TEST ACCOUNT> Option: EDIT PROVIDER

Provider: LASTNAME,FIRSTNAME NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FEE BASIS

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

DEA NUMBER: BI####### DETOX NUMBER: XI####### EXPIRATION DATE: DEC 11, 2018

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE III NARCOTIC: NO SCHEDULE III NON-NARCOTIC: NO

SCHEDULE IV: YES SCHEDULE V: YES

STREET ADDRESS 1: 1515 ANY STREET APARTMENT 123

STREET ADDRESS 2: FLOOR 321 SECTION 120 WING 3

STREET ADDRESS 3: ADDRESS #3

CITY: EAST RIDGE STATE: TENNESSEE ZIP CODE: 37373

OFFICE PHONE: 423-531-4545 PHONE #3: 890-567-1234

PHONE #4: 980-123-4567 COMMERCIAL PHONE: 800-555-5555

FAX NUMBER: 800-444-4444 VOICE PAGER: 800-333-3333

DIGITAL PAGER: 800-222-2222

ROOM: 777A

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - BI####### TENNESSEE Contains Detox # XI#######

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.: GB#######

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Type a DEA number and verify the following DEA # information is displayed for confirmation with visual indicator (\*\*) next to the field(s) that are different.

Expected Results

DOJ NAME: KETTERING MEDICAL CENTER VISTA NAME: LASTNAME,FIRSTNAME

The last names don't match.

Do you really want to continue? YES

WARNING: DEA# FORMAT MISMATCH -- CHECK SECOND LETTER

DEA NUMBER MANAGEMENT Nov 13, 2018@13:43:21 Page: 1 of 2

|  |  |  |
| --- | --- | --- |
| NAME | DOJ/DEA VALUE | LOCAL VALUE |
| NAME | DOJ/DEA VALUE | LOCAL VALUE |
| NAME: | KETTERING MEDICAL CENTER\*\* |  |
| ADDRESS 1: | 3535 SOUTHERN BLVD\*\* |  |
| ADDRESS 2: |  |  |
| ADDRESS 3: |  |  |
| CITY: | KETTERING\*\* |  |
| STATE: | OHIO\*\* |  |
| ZIP CODE: | 45429\*\* |  |
| ACTIVITY CODE: | B1\*\* |  |
| TYPE: | INSTITUTIONAL\*\* |  |
| DEA NUMBER: | GB1956020\*\* |  |
| DETOX NUMBER: |  |  |
| EXPIRATION DATE: | FEB 02, 2020\*\* |  |
| SCH II NARC: | YES\*\* |  |
| SCH II NON-NARC: | YES\*\* |  |
| SCH III NARC: | YES\*\* |  |

SCH III NON-NARC: YES\*\*

SCH IV: YES\*\*

+ Enter ?? for more actions

SCH IV: YES\*\*

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

DEA NUMBER MANAGEMENT Nov 13, 2018@13:43:42 Page: 1 of 2

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE CHANGES” and verify the DOJ data is shown with \*\* to indicate the differences.

Expected Results

DEA NUMBER MANAGEMENT Nov 13, 2018@13:43:42 Page: 1 of 2

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | | DOJ/DEA VALUE | LOCAL VALUE |
| NAME | | DOJ/DEA VALUE | LOCAL VALUE |
| NAME: | | KETTERING MEDICAL CENTER | KETTERING MEDICAL CENTER |
| ADDRESS 1: | | 3535 SOUTHERN BLVD | 3535 SOUTHERN BLVD |
| ADDRESS 2: | |  |  |
| ADDRESS 3: | |  |  |
| CITY: | | KETTERING | KETTERING |
| STATE: | | OHIO | OHIO |
| ZIP CODE: | | 45429 | 45429 |
| ACTIVITY CODE: | | B1 | B1 |
| TYPE: | | INSTITUTIONAL | INSTITUTIONAL |
| DEA NUMBER: | | GB1956020 | GB1956020 |
| DETOX NUMBER: | |  |  |
| EXPIRATION DATE: | | FEB 02, 2020 | FEB 02, 2020 |
| SCH II NARC: | | YES | YES |
| SCH II NON-NARC: | | YES | YES |
| SCH III NARC: | | YES | YES |
| SCH III NON-NARC: | | YES | YES |
| SCH IV: | | YES | YES |
| + | Enter ?? for more actions | |  |
| SCH IV: | YES | | YES |
| + | Enter ?? for more actions | |  |

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES

E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

\*\*Note: User can Accept/Save or Quit/Reject

Comments

Validates

Attachments

**Step 7**

**Information Step**

Description\*

**Scenario 2:**Ensure that user who has VA # but no DEA # can confirm updates to provider’s DEA information using

VistA.

**Note:**Select a prescriber who meets precondition #2.

**Step 8**

**Execution Step**

Description\*

From the menu, select ‘EDIT PROVIDER’ and enter a provider.

Expected Results

Provider: LASTNAME,FIRSTNAME

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: C & A

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. VA#: BI####

STREET ADDRESS 1: 1515 ANY STREET APARTMENT 123

STREET ADDRESS 2: FLOOR 321 SECTION 120 WING 3

STREET ADDRESS 3: ADDRESS #3

CITY: EAST RIDGE STATE: TENNESSEE ZIP CODE: 37373

OFFICE PHONE: 423-531-4545 PHONE #3: 890-567-1234

PHONE #4: 980-123-4567 COMMERCIAL PHONE: 800-555-5555

FAX NUMBER: 800-444-4444 VOICE PAGER: 800-333-3333

DIGITAL PAGER: 800-222-2222

ROOM: 777A

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES// DEA NUMBERS

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.: BI#######

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Change or update the DEA number information and verify that visual indicator of (\*\*) is shown next to the field(s) that are different.

Expected Results

DOJ NAME: KETTERING MEDICAL CENTER VISTA NAME: LASTNAME,FIRSTNAME

The last names don't match.

Do you really want to continue? YES

WARNING: DEA# FORMAT MISMATCH -- CHECK SECOND LETTER

DEA NUMBER MANAGEMENT Nov 13, 2018@13:43:21 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME DOJ/DEA VALUE LOCAL VALUE NAME: KETTERING MEDICAL CENTER\*\*

ADDRESS 1: 3535 SOUTHERN BLVD\*\* ADDRESS 2:

ADDRESS 3:

CITY: KETTERING\*\* STATE: OHIO\*\*

ZIP CODE: 45429\*\* ACTIVITY CODE: B1\*\*

TYPE: INSTITUTIONAL\*\* DEA NUMBER: BI#######\*\* DETOX NUMBER:

EXPIRATION DATE: FEB 02, 2020\*\* SCH II NARC: YES\*\*

SCH II NON-NARC: YES\*\* SCH III NARC: YES\*\* SCH III NON-NARC: YES\*\* SCH IV: YES\*\*

+ Enter ?? for more actions

SCH IV: YES\*\*

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES

E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE CHANGES” and verify the DOJ data is shown with \*\* to indicate the differences.

Expected Results

DEA NUMBER MANAGEMENT Nov 13, 2018@13:43:42 Page: 1 of 2

|  |  |  |
| --- | --- | --- |
| NAME | DOJ/DEA VALUE | LOCAL VALUE |
| NAME | DOJ/DEA VALUE | LOCAL VALUE |
| NAME: | KETTERING MEDICAL CENTER | KETTERING MEDICAL CENTER |
| ADDRESS 1: | 3535 SOUTHERN BLVD | 3535 SOUTHERN BLVD |
| ADDRESS 2: |  |  |
| ADDRESS 3: |  |  |
| CITY: | KETTERING | KETTERING |
| STATE: | OHIO | OHIO |

|  |  |  |  |
| --- | --- | --- | --- |
| ZIP CODE: | | 45429 | 45429 |
| ACTIVITY CODE: | | B1 | B1 |
| TYPE: | | INSTITUTIONAL | INSTITUTIONAL |
| DEA NUMBER: | | BI####### | BI####### |
| DETOX NUMBER: | |  |  |
| EXPIRATION DATE: | | FEB 02, 2020 | FEB 02, 2020 |
| SCH II NARC: | | YES | YES |
| SCH II NON-NARC: | | YES | YES |
| SCH III NARC: | | YES | YES |
| SCH III NON-NARC: | | YES | YES |
| SCH IV: | | YES | YES |
| + | Enter ?? for more actions | |  |
| SCH IV: | YES | | YES |
| + | Enter ?? for more actions | |  |

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

\*\*Note: User can Accept/Save or Quit/Reject

Comments

Validates

Attachments

**Step 11**

**Information Step**

Description\*

**Scenario 3:**Ensure that user can add Multiple DEA numbers for a **Non-VA**

**provider**using the VistA.

**Note**: Select a prescriber who meets precondition #3.

Verify that the selected Non-VA provider has the Provider Type field set to “C&A or FEE BASIS” in 200 file. (e.g., Enter type of provider.

Choose from:

1 FULL TIME

2 PART TIME

3 C & A

4 FEE BASIS

5 HOUSE STAFF)

**Step 12**

**Execution Step**

Description\*

From menu, select “EDIT PROVIDER” and enter a provider.

Expected Results

Provider: LASTNAME,FIRSTNAME

NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FEE BASIS

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

DEA NUMBER: BI####### DETOX NUMBER: XI####### EXPIRATION DATE: DEC 11, 2018

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE III NARCOTIC: NO SCHEDULE III NON-NARCOTIC: NO

SCHEDULE IV: YES SCHEDULE V: YES

STREET ADDRESS 1: 1515 ANY STREET APARTMENT 123

STREET ADDRESS 2: FLOOR 321 SECTION 120 WING 3

STREET ADDRESS 3: ADDRESS #3

CITY: EAST RIDGE STATE: TENNESSEE ZIP CODE: 37373

OFFICE PHONE: 423-531-4545 PHONE #3: 890-567-1234

PHONE #4: 980-123-4567 COMMERCIAL PHONE: 800-555-5555

FAX NUMBER: 800-444-4444 VOICE PAGER: 800-333-3333

DIGITAL PAGER: 800-222-2222

ROOM: 777A

NON-VA PRESCRIBER: NO// TAX ID:

EXCLUSIONARY CHECK PERFORMED: DATE EXCLUSIONARY LIST CHECKED: ON EXCLUSIONARY LIST:

AUTHORIZED TO WRITE MED ORDERS: YES//

DEA NUMBERS

1 - BI####### TENNESSEE Contains Detox # XI#######

SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry,

or type '@' to delete an existing entry.: GB#######

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Change or update the DEA number information and verify that visual indicator of (\*\*) is shown next to the field(s) that are different.

Expected Results

DOJ NAME: KETTERING MEDICAL CENTER VISTA NAME: LASTNAME,FIRSTNAME

The last names don't match.

Do you really want to continue? YES

WARNING: DEA# FORMAT MISMATCH -- CHECK SECOND LETTER

DEA NUMBER MANAGEMENT Nov 13, 2018@13:43:21 Page: 1 of 2

NAME DOJ/DEA VALUE LOCAL VALUE NAME DOJ/DEA VALUE LOCAL VALUE NAME: KETTERING MEDICAL CENTER\*\*

ADDRESS 1: 3535 SOUTHERN BLVD\*\* ADDRESS 2:

ADDRESS 3:

CITY: KETTERING\*\* STATE: OHIO\*\*

ZIP CODE: 45429\*\* ACTIVITY CODE: B1\*\*

TYPE: INSTITUTIONAL\*\* DEA NUMBER: BI#######\*\* DETOX NUMBER:

EXPIRATION DATE: FEB 02, 2020\*\* SCH II NARC: YES\*\*

SCH II NON-NARC: YES\*\* SCH III NARC: YES\*\* SCH III NON-NARC: YES\*\* SCH IV: YES\*\*

+ Enter ?? for more actions

SCH IV: YES\*\*

+ Enter ?? for more actions

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Type A to ‘ACCEPT AND SAVE CHANGES” and verify the DOJ data is shown with \*\* to indicate the differences.

Expected Results

DEA NUMBER MANAGEMENT Nov 13, 2018@13:43:42 Page: 1 of 2

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | | DOJ/DEA VALUE | LOCAL VALUE |
| NAME | | DOJ/DEA VALUE | LOCAL VALUE |
| NAME: | | KETTERING MEDICAL CENTER | KETTERING MEDICAL CENTER |
| ADDRESS 1: | | 3535 SOUTHERN BLVD | 3535 SOUTHERN BLVD |
| ADDRESS 2: | |  |  |
| ADDRESS 3: | |  |  |
| CITY: | | KETTERING | KETTERING |
| STATE: | | OHIO | OHIO |
| ZIP CODE: | | 45429 | 45429 |
| ACTIVITY CODE: | | B1 | B1 |
| TYPE: | | INSTITUTIONAL | INSTITUTIONAL |
| DEA NUMBER: | | BI####### | BI####### |
| DETOX NUMBER: | |  |  |
| EXPIRATION DATE: | | FEB 02, 2020 | FEB 02, 2020 |
| SCH II NARC: | | YES | YES |
| SCH II NON-NARC: | | YES | YES |
| SCH III NARC: | | YES | YES |
| SCH III NON-NARC: | | YES | YES |
| SCH IV: | | YES | YES |
| + | Enter ?? for more actions | |  |
| SCH IV: | YES | | YES |
| + | Enter ?? for more actions | |  |

C COPY DOJ/DEA VALUES TO VISTA A ACCEPT AND SAVE CHANGES E EDIT VISTA VALUES X QUIT AND REJECT CHANGES

\*\*Note: User can Accept/Save or Quit/Reject

Comments

Validates

Attachments

**Step 15**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209501: CAS\_MPDU\_TS\_1.3.1.05 | Verify Provider is authorized to prescribe a specific controlled substance schedule when pharmacist attempting to dispense (Paper Rx) in an outpatient setting.**



Creation Date: Jan 2, 2019 2:09:52 PM (UTC-06:00) Last Modified: Feb 6, 2019 9:44:25 AM (UTC-06:00) State: Approved

Originator: Henderson, John (AbleVets LLC) Owner: Gupta, Poonam (AbleVets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.3.1.05 | Verify Provider is authorized to prescribe a specific controlled substance schedule when pharmacist attempting to dispense (Paper Rx) in an outpatient setting.

Description: Verify Provider is authorized to prescribe a specific controlled substance schedule when pharmacist attempting to finish orders (Paper Rx)

in an outpatient setting

When the pharmacist is creating a backdoor pharmacy order, select a provider who is authorized to order the drugs for a limited number of schedules. (e.g. Provider is authorized to order only II and III drug schedules.)

Providers scenarios:

Provider 1: DEA# and no VA Provider 2: VA# and no DEA #.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

As of now the availability of the DOJ file is assumed as a manual process and hence cannot be tested. It is being used that the latest DOJ file is available in the Vista instance.

Expected Results

Comments

Validates

Attachments

**Step 2**

**Information Step**

Description\*

**Scenario 1:** When entering a prescription order, verify an error message is displayed if a provider enters a controlled substance prescription with a schedule the prescriber is not authorized to prescribe.

**Step 3**

**Execution Step**

Description\*

Log in to VistA as a pharmacist.

Expected Results

The primary VistA menu is displayed.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Navigate to PSO RX menu.

Expected Results

A list of “Patient Prescription Processing” options is displayed.

1 PSO RX Rx (Prescriptions)

2 PSO RX DRUG SEARCH Search for Mismatched Drug Orders

3 PSO RX LIST Prescription List for Drug Warnings

4 PSO RX QUEUE CMOP Queue CMOP Prescription

5 PSO RX SEARCH Search For Mismatched Patient Orders

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

**Type 1 (PSO RX Rx (Prescriptions) and then press Enter.**

Expected Results

**A list of options will be displayed; accept these options until you reach the main list of Patient Prescription Options**

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

**Select the Patient Prescription Processing option and then press Enter.**

Expected Results

**The “Select PATIENT NAME:” prompt is displayed.**

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

**Enter the patient name and press Enter. And keep pressing the Enter to select the default values until you see the Medication Profile Screen for the patient.**

Expected Results

**The Medication Profile of the patient is displayed.**

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Select NO for New order. And then press Enter to select the default when prompted for the patient RX PATIENT STATUS.

Expected Results

The “DRUG:” prompt is displayed.

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Enter a controlled substance which is of a schedule, which the provider doesn’t have the permissions to order and then press Enter.

Example: Select a drug of Schedule IV or V.

Expected Results

Clinical order checks are done and displayed.

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Enter the required values when prompted for Dosage Units, Route and Schedule and then press Enter to select the default values when prompted for limited duration, conjunction and patient instructions.

Enter the values for Days Supply, QTY, Copies, # of Refills and then press Enter

Expected Results

The primary provider option is displayed.

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Enter the provider mentioned in the preconditions and then press Enter.

Expected Results

Verify that an error message is displayed with the following text.

“DEA ###### Not Valid for Schedule: XX.”

Comments

Validates

Attachments

**Step 12**

**Information Step**

Description\*

**Scenario 2:**Provider(s) will be allowed to enter orders of Schedule I (C-I) controlled substance medications if they have other CS privileges. -

The Drug e.g Marijuana (DEA Special HDLG 1). Repeat steps 1to 11

**Note:**

**Must have the (using the XPAR MENU TOOLS) parameter PSOEPCS EXPIRED DEA FAILOVER set to ‘ON’.**

**Step 13**

**Execution Step**

Description\*

Run the steps 1 through 8 again using a provider who has a current DEA# and no VA# and select a drug from the schedule he is authorized to write.

Expected Results

**Verify that no error message is displayed and the provider is accepted.**

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Run the steps 1 through 8 again using a provider who has no DEA# and has a VA# and select a drug from the schedule he is authorized to write.

Expected Results

**Verify that no error message is displayed and the provider is accepted.**

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\* End of test.

Expected Results

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209505: CAS\_MPDU\_TC\_1.3.4.02\_Allow Providers to order buprenorphine-containing products with permitted dosage forms.**



Creation Date: Jan 2, 2019 2:36:34 PM (UTC-06:00) Last Modified: Mar 21, 2019 9:17:34 AM (UTC-05:00) State: Approved

Originator: Henderson, John (AbleVets LLC) Owner: Paturi, Anuradha- (Ablevets)

Type: Manual

Test Data: Unassigned

Description: 1. As a provider without a detox number, if I order a buprenorphine-containing product, I want the dosage form ordered checked against the dosage forms allowed.

a. If the dosage form is permitted for use without a detox number, I want to be allowed to complete the order.

b. If the dosage form is not exempted and requires a detox number, I want to be blocked from completing the order

Display the following error message: “Order for controlled substance could not be completed. Provider does not have a valid Detoxification/Maintenance

ID number on record and is ineligible to sign the order

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience

a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

All data is for demonstration purposes only and not to taken as actual values.

Expected Results

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

Vista data setup for Buprenorphine exempted dosage

Login to Vista using valid credentials

At Options go to Xpar Edit->Update Parameter->Dosage-> System-> Buprenorphine-> Set sequence -> Add dosage

Expected Results

**Dosage selected**

**Ex-**

**Select Sequence: 2**

**Are you adding 2 as a new Sequence? Yes// YES**

**Sequence: 2// 2**

**Dosage Form: TAB**

**1 TAB**

**2 TAB (DELAYED RELEASE)**

**3 TAB,BUCC,SA**

**4 TAB,BUCCAL**

**5 TAB,CHEWABLE**

**Press <Enter> to see more, '^' to exit this list, OR CHOOSE 1-5: 1 TAB**

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

**Scenario 1: Provider has a valid DEA# and no Detox #. Selects exempted dosage form.**

Login to CPRS as a Provider and Select a Patient

Expected Results

Patient information page displayed

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Go to Orders tab -> Out Patient Meds -> Enter Buprenorphine and click Ok

Select the Buprenorphine dosage meds from the list (Exempted dosage form as in pre condition) Ex: BUPRENORPHINE TAB, SUBLINGUAL

Expected Results

Provider able to proceed with the Order without Detox number

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

**Scenario 2: Provider has a valid DEA# and Detox #. Selects Non- exempted**

**Dosage form.**

Login to CPRS as a Provider

Expected Results

The CPRS cover sheet is displayed prompting to select a patient

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Select Patient and click Ok

Expected Results

Patient information displayed.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Go to Orders tab -> Out Patient Meds -> Enter Buprenorphine(Non exempted dosage form) and click Ok

Expected Results

List of valid DEA#’s for that Provider is displayed

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Select the DEA# and click OK

Expected Results

Provider able to select a DEA and proceed with the Prescription.

Detox# is displayed on the DEA# selection along with the Address.

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

**Scenario 3: Provider has a valid DEA# but no Detox #. Selects exempted dosage form.**

Login to CPRS as a Provider

Expected Results

The CPRS cover sheet is displayed prompting to select a patient

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Select Patient and click Ok

Expected Results

Patient information displayed.

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Go to Orders tab -> Out Patient Meds -> Enter Buprenorphine and click Ok

Select the Buprenorphine (non exempted dosage form)from the list to enter your own dosage

Expected Results

Error message displayed :

“Order for controlled substance could not be completed. Provider does not have a valid Detoxification/ Maintenance ID number on record and is ineligible to sign the order

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

**Scenario 4: Provider has a valid DEA# and Detox #. Selects exempted dosage form.**

Login to CPRS as a Provider

Expected Results

The CPRS cover sheet is displayed prompting to select a patient

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Select Patient and click Ok

Expected Results

Patient information displayed.

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Go to Orders tab -> Out Patient Meds -> Enter Buprenorphine (exempted dosage form) and click Ok

Expected Results

Provider able to proceed with order. No error.

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

**Scenario 5: Provider has a valid VA# and no DEA #. Select exempted dosage form.**

Login to CPRS as a Provider

Expected Results

The CPRS cover sheet is displayed prompting to select a patient

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Select Patient and click Ok

Expected Results

Patient information displayed.

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Go to Orders tab -> Out Patient Meds -> Enter Buprenorphine(exempted dosage form) and click Ok

Expected Results

Provider able to proceed with order. No error.

Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

**Scenario 6: Provider has a valid VA# and no DEA#. Selects non exempted dosage form.**

Login to CPRS as a Provider

Expected Results

The CPRS cover sheet is displayed prompting to select a patient

Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Select Patient and click Ok

Expected Results

Patient information displayed.

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Go to Orders tab -> Out Patient Meds -> Enter Buprenorphine(Non exempted dosage form) and click Ok

Expected Results

Error message displayed :

“Order for controlled substance could not be completed. Provider does not have a valid Detoxification/ Maintenance ID number on record and is ineligible to sign the order

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209508: CAS\_MPDU\_TS\_1.1.2.03\_Make DEA# available for updates to the DEA# from DOJ File**



Creation Date: Jan 2, 2019 2:49:30 PM (UTC-06:00) Last Modified: Apr 19, 2019 9:53:30 AM (UTC-05:00) State: Approved

Originator: Henderson, John (AbleVets LLC) Owner: Gupta, Poonam (AbleVets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.03\_Make DEA# available for updates to the DEA# from DOJ File

Description: The following test case will verify the modifications made to VistA.

• I want up-to-date DEA number information available from the DOJ file daily. (Note: This may be a manual process)

• For subsequent updates of DEA # records in the DEA file, I want up-to-date DEA number information from the DOJ file

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

As of now the availability of the DOJ file is assumed as a manual process and hence cannot be tested. It is being used that the latest DOJ file is available in the Vista instance.

Expected Results

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

Log in to your Vista instance.

Expected Results

The primary VistA menu is displayed. Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

At the prompt type “Core Applications”

Expected Results

Core application options displays

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

At the prompt type “Outpatient Pharmacy Manager ...”

Expected Results

Outpatient menu options displays

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

When prompted for ‘Division,' select the division associated with your pharmacy system.

Expected Results

Division: 631 1 631 NORTHAMPTON 631 2 631A SPRINGFIELD 631A 3 631GE WORCESTER 631GE CHOOSE 1-3: 1

NORTHAMPTON 631

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

When prompted to ‘Select Label printer,' press <enter> three times, at which you will see Outpatient Manger Menu

Expected Results

The user is taken to the next menu list for “Outpatient Pharmacy Manager Menu”. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Navigate to MAINTENANCE menu.

Note: Select your Division if prompted for press Enter.

Expected Results

The Edit Provider is displayed as a menu item.

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Navigate to the field DEA NUMBERS. Expected Results

The “SELECT an existing entry to edit,

Type a DEA number (e.g., AA1234563) to begin a new entry, or type '@' to delete an existing entry.:” is displayed.

The DEA#s assigned to the provider are listed for selection.

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Select a DEA# and then press Enter.

Expected Results

The DEA Number Management Screen is displayed. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Verify that the information for all the fields in the column DOJ/DEA value is filled.

Note: This information is the information from the latest DOJ file.

Expected Results

The latest information from DOJ file is available to be used for edits.

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Verify that the data is displayed in the DOJ/DEA column for the following fields:

i. Expiration Date

ii.Name (Provider or Institution)

iiiA. ivA.

ddress1 ddress2

v.Address3

viC. ity, State, and Zip

viBi. usiness Type

viBii. usiness Subtype

ixD.

rug Schedule Authorizations

1.Schedule II - Y/N

2.Schedule IIn -Y/N

3.Schedule III - Y/N

4.Schedule IIIn -Y/N

5.Schedule IV - Y/N

6.Schedule V - Y/N

Expected Results

The fields are populated in the DOJ/DEA as applicable.

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\* End of test.

Expected Results

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**(b)**



**209516: CAS\_MPDU\_TS\_1.2.1.01 | DEA Expiration Date Reports (a) and**

Creation Date: Jan 2, 2019 3:26:17 PM (UTC-06:00) Last Modified: Apr 11, 2019 10:22:50 AM (UTC-05:00)

State: Approved

Originator: Henderson, John (AbleVets LLC) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:CAS\_MPDU\_TS\_1.2.1.01 | DEA Expiration Date Reports

Description: VA representative that credentials providers and/or updates DEA number information, I need a new report that lists DEA # Expiration information for providers so that I can proactively contact providers to let them know the expiration status of their DEA #.

1. Provider is Active and DEA is expired.

2. Provider is Active and does not have a DEA expiration date.

3. Provider is Active and DEA is not expired, but will expire in <30 days.

4. Provider is Active and DEA is not expired, but will expire in <90 days.

5. The report can be queued.

6. The report can be mailed.

7. The report can be printed. (unable to print in test environment)

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

**\*\*\*All data is for demonstration purposes only and not to taken as actual values**\*\*\*

**\*\*\*This test script covers 1.2.1.08 | Include the label and field “Remarks” only when there is data in the field on the DEA Expiration Date Report.\*\*\***

**“Remarks” label and field will be included on DEA Expiration Date Report only if the field contains data.**

• Access to VistA.

• Access to Fileman (to manipulate data with help of an admin if no access)

Note:

Used Fileman to manipulate data in testing environment.

**Step 2**

**Execution Step**

Description\*

Log into your local vista instance

Expected Results

User will be taken to the access/verify code prompts

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date to T-1.

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: DEA NUMBERS// (5 entries)

EDIT WHICH FIELD: ALL// EXPIRATION DATE THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: AUG 2,2018// T-1 (JUN 17, 2018)

Select DEA NUMBERS: MI1965017

EXPIRATION DATE: AUG 17,2018// T-1 (JUN 17, 2018) Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

VISTAGOLD>D ^XUP

1. DEA Expiration Date Report

2. Print Prescribers with Privileges

3. Print DISUSER Prescribers with Privileges

4. Print PSDRPH Key Holders

5. Print Setting Parameters Privileges

6. Print Audits for Prescriber Editing

7. Changes to DEA Prescribing Privileges Report

8. Allocation Audit of PSDRPH Key Report

9. Enter/Edit EPCS Access Reports Parameters

10. Allow VA Number if DEA Number Expired

11. Set Pharmacy Operating Mode

12. Edit Facility DEA# and Expiration Date

Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

At the ‘ Select ePCS DEA Utility Functions <TEST ACCOUNT> Option:’ prompt, select 1 DEA Expiration Date Report.

Expected Results

Select ePCS DEA Utility Functions <TEST ACCOUNT> Option:1

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access: Active

Select one of the following: E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: EXPIRED

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select Active.

Expected Results

Select one of the following:

E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS

Expiration Date Status:

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select Expired.

Expected Results

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

DEA EXPIRATION REPORT - Includes: Active and EXPIRED. Report

Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION

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

IRWIN,BENJAMIN BI1956020 JUN 17, 2018 XI1956020 JUN 18, 2018@13:09:40

TECHNICAL LEAD IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

IRWIN,MARCIA MI1965017 JUN 17, 2018

DIETITION IRM REMARKS: This is another test provider.

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Repeat steps 1-2 and set the Expiration Date to T

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: JUN 17,2018// T (JUN 18, 2018)

Select DEA NUMBERS: MI1965017

EXPIRATION DATE: JUN 17,2018// T (JUN 18, 2018)

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Repeat steps 3-6 and verify the provider is not on the DEA EXP DATE REPORT printout

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access: Active

Select one of the following: E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: EXPIRED

DEA EXPIRATION REPORT - Includes: Active Users and EXPIRED. Report

Date: 03/28/2019 Page: 1

TERM DATE NAME DEA DEA EXP DT LAST SIGN-ON TITLE SERVICE/SECTION

--------------------------------------------------------------------------- BENDER, CAROL L MD XXNNNNNNN 07/31/2018 04/06/

2010

2011

CLIONSKY, EMILYMARIE XXNNNNNNN 03/01/2019 11/28/

2011

SANGURIMA, JESSICA ELISE MD XXNNNNNNN 01/01/2019 08/08/

SCAVONE, DONNA M NP XXNNNNNNN 02/28/2019 01/27/2012 NURSE PRACTITIONER PRIMARY CARE

2018

UDELL, ELDON XXNNNNNNN 12/16/

Type <Enter> to continue or '^' to exit:

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Repeat steps 1-2 and set the Expiration Date to T+1

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: JUN 18,2018// T+1 (JUN 19, 2018) Select DEA NUMBERS: MI1965017

EXPIRATION DATE: JUN 18,2018// T+1 (JUN 19, 2018)

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Repeat step 3-6 and verify the provider is not on the DEA EXP DATE REPORT printout.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access: Active

Select one of the following: E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: EXPIRED

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

DEA EXPIRATION REPORT - Includes: Active Users and EXPIRED. Report

Date: 03/28/2019 Page: 1

TERM DATE NAME DEA DEA EXP DT LAST SIGN-ON TITLE SERVICE/SECTION

--------------------------------------------------------------------------- BENDER, CAROL L MD XXNNNNNNN 07/31/2018 04/06/

2010

2011

CLIONSKY, EMILYMARIE XXNNNNNNN 03/01/2019 11/28/

2011

SANGURIMA, JESSICA ELISE MD XXNNNNNNN 01/01/2019 08/08/

SCAVONE, DONNA M NP XXNNNNNNN 02/28/2019 01/27/2012 NURSE PRACTITIONER PRIMARY CARE

2018

UDELL, ELDON XXNNNNNNN 12/16/

Type <Enter> to continue or '^' to exit:

Comments

Validates

Attachments

**Step 12**

**Information Step**

Description\*

**Scenario 2:**

Provider is Active and does not have a DEA expiration date.

**Step 13**

**Execution Step**

Description\*

Log into your local vista instance

Expected Results

User will be taken to the access/verify code prompts

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and delete the Expiration Date using the @ sign.

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: JUN 19,2018// @

SURE YOU WANT TO DELETE? Y (Yes)

Select DEA NUMBERS: MI1965017

EXPIRATION DATE: JUN 19,2018// @

SURE YOU WANT TO DELETE? Y (Yes)

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

VISTAGOLD>D ^XUP

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select Active

Expected Results

Select one of the following:

E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS

Expiration Date Status:

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’, select ‘NO EXP DATE’ and verify the ‘DEA EXP DT’ field is left blank.

Expected Results

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TERM DATE | NAME | DEA | DEA EXP DT | DETOX ID | LAST SIGN-ON |
| TITLE | SERVICE/SECTION |  |  |  |  |

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

IRWIN,BENJAMIN BI1956020 XI1956020 JUN 18, 2018@13:09:40 TECHNICAL LEAD IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

IRWIN,MARCIA MI1965017 DIETITION IRM

REMARKS: This is another test provider

Comments

Validates

Attachments

**Step 18**

**Information Step**

Description\*

**Scenario 3:**

Provider is Active and DEA is not expired, but will expire in <30 days

**Step 19**

**Execution Step**

Description\*

Log into your local vista instance

Expected Results

User will be taken to the access/verify code prompts

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date to <30 days.

Expected Results

A FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: T+29 (JUL 17, 2018)

Select DEA NUMBERS: MI1965017

EXPIRATION DATE: T+29 (JUL 17, 2018)

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access:

Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select Active.

Expected Results

VISTAGOLD>D EN^XUEPCSRP Report requires 132 Columns

Select one of the following:

A Active

D DISUSERed

B Both

CPRS System Access: Active

Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select ‘<30-DAYS’ and verify the ‘DEA EXP DT’ field contains data that will expire in <30 days.

Expected Results

Select one of the following:

E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: 3 <30-DAYS

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

DEA EXPIRATION REPORT - Includes: Active and EXPIRES IN LESS THEN 30 DAYS. Report

Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION

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

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IRWIN,BENJAMIN BI1956020 JUL 17, 2018 XI1956020 JUN 18, 2018@13:09:40

TECHNICAL LEAD IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

IRWIN,MARCIA MI1965017 JUL 17, 2018 DIETITION IRM

REMARKS: This is another test provider.

Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

Navigate back to FileMan and set the Expiration Date @ 30 days.

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: JUN 18,2018// T+30 (JUL 18, 2018) Select DEA NUMBERS: MI1965017

EXPIRATION DATE: JUN 18,2018// T+30 (JUL 18, 2018)

Comments

Validates

Attachments

**Step 25**

**Execution Step**

Description\*

Repeat steps 21-22 and verify the provider is not on the DEA EXP DATE REPORT printout.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access: Active

Select one of the following: E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: 3 <30-DAYS

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

DEA EXPIRATION REPORT - Includes: Active Users and Expired/Expiring within next 30 days. Report

Date: 03/29/2019 Page: 1

TERM DATE NAME DEA DEA EXP DT LAST SIGN-ON TITLE SERVICE/SECTION

--------------------------------------------------------------------------- BENDER, CAROL L MD XXNNNNNNN 07/31/2018 04/06/

2010

2011

CLIONSKY, EMILYMARIE XXNNNNNNN 03/01/2019 11/28/

LEVY, DANIEL JONATHAN MD XXNNNNNNN 03/31/2019 01/31/2012

PHYSICIAN PRIMARY CARE

2011

SANGURIMA, JESSICA ELISE MD XXNNNNNNN 01/01/2019 08/08/

SCAVONE, DONNA M NP XXNNNNNNN 02/28/2019 01/27/2012 NURSE PRACTITIONER PRIMARY CARE

2018

UDELL, ELDON XXNNNNNNN 12/16/

VISSER, SHARON J XXNNNNNNN 04/11/2019 03/25/2019 SYSTEM ADMINISTRATOR BAY PINES TEST C

REMARKS: TESTING REMARKS

LABEL

Type <Enter> to continue or '^' to exit:

Comments

Validates

Attachments

**Step 26**

**Execution Step**

Description\*

Navigate back to FileMan and set the Expiration Date @ 31 days.

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: JUL 18,2018// T+31 (JUL 19, 2018)

Select DEA NUMBERS: MI1965017

EXPIRATION DATE: JUL 18,2018// T+31 (JUL 19, 2018)

Comments

Validates

Attachments

**Step 27**

**Execution Step**

Description\*

Repeat steps 21-22 and verify the provider does not display as their Expiration Date is set @ 31 days when the option <30 days is selected.

Expected Results

VISTAGOLD>D EN^XUEPCSRP Report requires 132 Columns

Select one of the following:

A Active

D DISUSERed

B Both

CPRS System Access: Active

Select one of the following: E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: 3 <30-DAYS

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

DEA EXPIRATION REPORT - Includes: Active and EXPIRES IN LESS THEN 30 DAYS. Report

Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION

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

Comments

Validates

Attachments

**Step 28**

**Information Step**

Description\*

**Scenario 4:**

Provider is Active and DEA is not expired, but will expire in <90 days.

**Step 29**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date to <90 days.

Expected Results

A FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: JUL 19,2018// T+89 (SEP 15, 2018) Select DEA NUMBERS: MI1965017

EXPIRATION DATE: JUL 19,2018// T+89 (SEP 15, 2018)

Comments

Validates

Attachments

**Step 30**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns

Select one of the following:

A Active

D DISUSERed

B Both

CPRS System Access:

Comments

Validates

Attachments

**Step 31**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select Active.

Expected Results

VISTAGOLD>D EN^XUEPCSRP Report requires 132 Columns

Select one of the following:

A Active

D DISUSERed

B Both

CPRS System Access: Active

Comments

Validates

Attachments

**Step 32**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select 9 ‘<90-DAYS’ and verify the ‘DEA EXP DT’ field contains data that will expire in <90 days.

Expected Results

Select one of the following:

E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: 9 <90-DAYS

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

DEA EXPIRATION REPORT - Includes: Active and EXPIRES IN LESS THEN 90 DAYS. Report

Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION

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

IRWIN,BENJAMIN BI1956020 SEP 15, 2018 XI1956020 JUN 18, 2018@13:09:40

TECHNICAL LEAD IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

IRWIN,MARCIA MI1965017 SEP 15, 2018

DIETITION IRM

REMARKS: This is another test provider.

Comments

Validates

Attachments

**Step 33**

**Execution Step**

Description\*

Navigate back to FileMan and set the Expiration Date @ 90 days.

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: SEP 15,2018// T+90 (SEP 16, 2018) Select DEA NUMBERS: MI1965017

EXPIRATION DATE: SEP 15,2018// T+90 (SEP 16, 2018)

Comments

Validates

Attachments

**Step 34**

**Execution Step**

Description\*

Repeat steps 30-31 and verify the provider is not on the DEA EXP DATE REPORT printout.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access: Active

Select one of the following: E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: 9 <90-DAYS

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

DEA EXPIRATION REPORT - Includes: Active Users and Expired/Expiring within next 90 days. Report

Date: 03/29/2019 Page: 1

TERM DATE NAME DEA DEA EXP DT LAST SIGN-ON TITLE SERVICE/SECTION

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NURSE | AABERG,BOYD G PRIMARY CARE | XXNNNNNNN | 06/20/2019 | 01/31/2012 | REGISTERED |
| 2010 | BENDER, CAROL L MD | XXNNNNNNN | 07/31/2018 | 04/06/ |  |
| 2011 | CLIONSKY, EMILYMARIE | XXNNNNNNN | 03/01/2019 | 11/28/ |  |
| PHYSICIAN | LEVY, DANIEL JONATHAN MD PRIMARY CARE | XXNNNNNNN | 03/31/2019 | 01/31/2012 |  |
| 2011 | SANGURIMA, JESSICA ELISE MD | XXNNNNNNN | 01/01/2019 | 08/08/ |  |
| PRACTITIONER | SCAVONE, DONNA M NP PRIMARY CARE | XXNNNNNNN | 02/28/2019 | 01/27/2012 | NURSE |
| 2018 | UDELL, ELDON | XXNNNNNNN | 12/16/ |  |  |
| ASSISTANT | VANWAGNER, WILLIAM F PRIMARY CARE | XXNNNNNNN | 05/31/2019 | 01/31/2012 | PHYSICIAN |
| ADMINISTRATOR | VISSER, SHARON J  BAY PINES TEST C | XXNNNNNNN | 04/11/2019 | 03/25/2019 | SYSTEM |
| LABEL | REMARKS: TESTING REMARKS |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NURSE | Lastname,Firstname  MENTAL HEALTH & | XXNNNNNNN | 05/31/2019 | 01/27/2012 | CLINICAL |
| NURSE | Lastname,Firstname  MENTAL HEALTH & | XXNNNNNNN | 05/31/2019 | 01/31/2012 | CLINICAL |

Type <Enter> to continue or '^' to exit:

Comments

Validates

Attachments

**Step 35**

**Execution Step**

Description\*

Navigate back to FileMan and set the Expiration Date @ 91 days.

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: SEP 16,2018// T+91 (SEP 17, 2018)

Select DEA NUMBERS: MI1965017

EXPIRATION DATE: SEP 16,2018// T+91 (SEP 17, 2018)

Comments

Validates

Attachments

**Step 36**

**Execution Step**

Description\*

Repeat steps 30-31 and verify the provider does not display as their Expiration Date is set @ 91 days when the option <90 days is selected.

Expected Results

VISTAGOLD>D EN^XUEPCSRP Report requires 132 Columns

Select one of the following:

A Active

D DISUSERed

B Both

CPRS System Access: Active

Select one of the following: E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS

Expiration Date Status: 9 <90-DAYS

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

DEA EXPIRATION REPORT - Includes: Active and EXPIRES IN LESS THEN 90 DAYS. Report

Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION

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

Comments

Validates

Attachments

**Step 37**

**Information Step**

Description\*

**Scenario 5:** The report can be queued.

**Step 38**

**Execution Step**

Description\*

From primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

1 DEA Expiration Date Report

2 Print Prescribers with Privileges

3 Print DISUSER Prescribers with Privileges

4 Print PSDRPH Key Holders

5 Print Setting Parameters Privileges

6 Print Audits for Prescriber Editing

7 Changes to DEA Prescribing Privileges Report

8 Allocation Audit of PSDRPH Key Report

9 Enter/Edit EPCS Access Reports Parameters

10 Allow VA Number if DEA Number Expired

11 Set Pharmacy Operating Mode

12 Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 39**

**Execution Step**

Description\*

Select 1 ‘DEA Expiration Date Report’ and press enter.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access:

Comments

Validates

Attachments

**Step 40**

**Execution Step**

Description\*

At the ‘CPRS System Access:’ prompt, type D (DISUSERed)

Expected Results

Select one of the following:

E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status:

Comments

Validates

Attachments

**Step 41**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, type 9 (<90-DAYS) and verify the request is queued.

Expected Results

DEVICE: HOME// QUEUE TO PRINT ON

DEVICE: HOME// HFS;132;66 Host File Server

HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"//

Requested Start Time: NOW// (JUN 18, 2018@15:20:08) REQUEST QUEUED TASK=1384

VISTAGOLD>

DEA EXPIRATION REPORT - Includes: DISUSER and EXPIRES IN LESS THEN 90 DAYS. Report

Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION

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

LASTNAME, FIRSTNAME BI####### SEP 15, 2018 BI#######0 JUN 18, 2018@13:09:

40 TECHNICAL LEAD IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

LASTNAME, FIRSTNAME AA####### SEP 06,

2018 DIETITION IRM REMARKS: This is another test provider.

Comments

Validates

Attachments

**Step 42**

**Information Step**

Description\*

Scenario 6: The report can be mailed

**Step 43**

**Execution Step**

Description\*

From primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

1 DEA Expiration Date Report

2 Print Prescribers with Privileges

3 Print DISUSER Prescribers with Privileges

4 Print PSDRPH Key Holders

5 Print Setting Parameters Privileges

6 Print Audits for Prescriber Editing

7 Changes to DEA Prescribing Privileges Report

8 Allocation Audit of PSDRPH Key Report

9 Enter/Edit EPCS Access Reports Parameters

10 Allow VA Number if DEA Number Expired

11 Set Pharmacy Operating Mode

12 Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 44**

**Execution Step**

Description\*

Select 1 ‘DEA Expiration Date Report’ and press enter.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access:

Comments

Validates

Attachments

**Step 45**

**Execution Step**

Description\*

At the ‘CPRS System Access:’ prompt, type D (DISUSERed)

Expected Results

Select one of the following:

E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS

Expiration Date Status:

Comments

Validates

Attachments

**Step 46**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, type 9 (<90-DAYS) and verify the report is mailed.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access: DISUSERed

Select one of the following: E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS Expiration Date Status: 9 <90-DAYS DEVICE: HOME// MESSAGE

1 MESSAGE P-MESSAGE-HFS-MSM/DOS HFS (MSM/DOS) FILE => MESSAGE

2 MESSAGE P-MESSAGE-HFS-MSM/NT HFS (MSM/NT) FILE => MESSAGE

3 MESSAGE P-MESSAGE-HFS-OPENM-NT HFS (OpenM-NT) FILE => MESSAGE

4 MESSAGE P-MESSAGE-HFS-VXD HFS (VXD) FILE => MESSAGE

Choose 1-4> 3 MESSAGE P-MESSAGE-HFS-OPENM-NT HFS (OpenM-NT) FILE => MESSAGE Subject: DEA EXP REPORT TEST

Select one of the following:

M Me

P Postmaster

From whom: Me//

Send mail to: LASTNAME, FIRSTNAME// LASTNAME, FIRSTNAME Select basket to send to: IN//

And Send to:

Moving to MailMan message...

........................... Finished moving.

Sending [339]...

Sent

Comments

Validates

Attachments

**Step 47**

**Execution Step**

Description\*

Exit out of ‘ ePCS DEA Utility Functions’ and navigate to MailMan option.

Expected Results

Select OPTION NAME: MAILMAN

1 MAILMAN MASTER MENU XMMASTER MailMan Master Menu

2 MAILMAN MENU XMUSER MailMan Menu

3 MAILMAN SITE PARAMETERS XMKSP MailMan Site Parameters

CHOOSE 1-3: 2 XMUSER MailMan Menu

VA MailMan 8.0 service for IRWIN.BENJAMIN@WWW.BMIRWIN.COM You last used MailMan: 06/18/18@15:43

You have no new messages.

NML New Messages and Responses

RML Read/Manage Messages

SML Send a Message

Query/Search for Messages

AML Become a Surrogate (SHARED,MAIL or Other) Personal Preferences ...

Other MailMan Functions ...

Help (User/Group Info., etc.) ...

Select MailMan Menu <TEST ACCOUNT> Option: RML Read/Manage Messages

Read mail in basket: IN// (1 message) Last message number: 1 Messages in basket: 1

Enter ??? for help.

IN Basket Message: 1//

Subj: DEA EXP REPORT TEST [#339] 06/18/18@15:46 10 lines

From: LASTNAME, FIRSTNAME In 'IN' basket. Page 1

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

DEA EXPIRATION REPORT - Includes: DISUSER and EXPIRES IN LESS THEN 90 DAYS.Re port Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION

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

LASTNAME, FIRSTNAME BI####### SEP 15, 2018 BI#######0

JUN 18, 2018@15:43:33 TECHNICAL LEAD IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

LASTNAME, FIRSTNAME AA####### SEP 06, 2018

DIETITION IRM REMARKS: This is another test provider.

Enter message action (in IN basket): Ignore//

DEA EXPIRATION REPORT - Includes: Active Users and Expired/Expiring within next 90 days. Report

Date: 07/16/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT LAST SIGN-ON TITLE SERVICE/SECTION

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

LASTNAME, FIRSTNAME BI####### 07/20/2018 07/16/2018 SYSTEM REDESIGN COORDIN IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

LASTNAME, FIRSTNAME VI1998016 10/13/2018 07/16/2018 SYSTEM REDESIGN COORDIN IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

COORDIN IRM

KETTERING MEDICAL CENTER GB1956020 08/15/2018 07/16/2018 SYSTEM REDESIGN

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

Comments

Validates

Attachments

**Step 48**

**Information Step**

Description\*

**Scenario 7:(From b test script)**

Provider Active or DISUSERed and DEA is expired.

**Step 49**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date and DISUSER

Expected Results

A FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI1956020

EXPIRATION DATE: SEP 17,2018// T-1 (JUN 17, 2018)

Select DEA NUMBERS: MI1965017

EXPIRATION DATE: SEP 17,2018// T-1 (JUN 17, 2018) Select DEA NUMBERS:

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// NEW PERSON (67 entries) EDIT WHICH FIELD: ALL// 7 DISUSER

THEN EDIT FIELD:

Select NEW PERSON NAME: BI IRWIN,BENJAMIN BI TECHNICAL LEAD DISUSER: NO//

Select NEW PERSON NAME: MI1965017 IRWIN,MARCIA MLI DIETITION DISUSER: NO// Y YES

Select NEW PERSON NAME:

Comments

Validates

Attachments

**Step 50**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns

Select one of the following:

A Active

D DISUSERed

B Both

CPRS System Access:

Comments

Validates

Attachments

**Step 51**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select Both.

Expected Results

VISTAGOLD>D EN^XUEPCSRP Report requires 132 Columns

Select one of the following:

A Active

D DISUSERed

B Both

CPRS System Access: Both

Comments

Validates

Attachments

**Step 52**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select EXPIRED and verify the ‘DEA EXP DT’ field contains data for Both.

Expected Results

DEA EXPIRATION REPORT - Includes: Active, DISUSER, and EXPIRED.Report Date: 03

/12/2019 Page: 1

TERM DATE NAME DEA DEA EXP DT LAST S IGN-ON TITLE SERVICE/SECTION

--------------------------------------------------------------------------- ALPHA,PROVIDER K AP1234563 05/31/2018 03/11/

2019 SYSTEM ADMINISTRATOR BAY PINES TEST C REMARKS: TESTING REMARKS LABEL

2010

BENDER, CAROL L MD AB7922570 07/31/2018 04/06/

2011

CLIONSKY, EMILYMARIE BG6857479 03/01/2019 11/28/

2011

SANGURIMA, JESSICA ELISE MD BS5606302 01/01/2019 08/08/

SCAVONE, DONNA M NP MS1090163 02/28/2019 01/27/

2012 NURSE PRACTITIONER PRIMARY CARE Type <Enter> to continue or '^' to exit:

**Note:**

**“Remarks” label and field will be included on DEA Expiration Date Report only if the field contains data.**

Comments

Validates

Attachments

**Step 53**

**Information Step**

Description\*

**Scenario 8:** Provider Active or DISUSERed and does not have a DEA expiration date.

**Step 54**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and delete the Expiration Date using the @ sign and set DISUSER.

Expected Results

VA FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: NEW PERSON// DEA NUMBERS (5 entries) EDIT WHICH FIELD: ALL// ??

EDIT WHICH FIELD: ALL// EXPIRATION DATE THEN EDIT FIELD:

Select DEA NUMBERS: BI####### EXPIRATION DATE: JUN 17,2018// @

SURE YOU WANT TO DELETE? Y (Yes)

Select DEA NUMBERS: MI####### EXPIRATION DATE: JUN 17,2018// @

SURE YOU WANT TO DELETE? Y (Yes) Select DEA NUMBERS:

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// NEW PERSON (67 entries) EDIT WHICH FIELD: ALL// 7 DISUSER

THEN EDIT FIELD:

Select NEW PERSON NAME: BI LASTNAME, FIRSTNAME BI TECHNICAL LEAD DISUSER: NO//

Select NEW PERSON NAME: MI####### LASTNAME, FIRSTNAME MLI DIETITION DISUSER: YES//

Select NEW PERSON NAME:

Comments

Validates

Attachments

**Step 55**

**Execution Step**

Description\*

Exit out of FileMan then, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access: Both

Comments

Validates

Attachments

**Step 56**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select Both

Expected Results

Select one of the following:

E EXPIRED

N NO EXP DATE

3 <30-DAYS

9 <90-DAYS

Expiration Date Status:

Comments

Validates

Attachments

**Step 57**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’, select ‘NO EXP DATE’ and verify the ‘DEA EXP DT’ field is left blank.

Expected Results

DEA EXPIRATION REPORT - Includes: Active, DISUSER, and NO EXPIRATION DATE. Report

Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION

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

LASTNAME, FIRSTNAME BI####### XI1956020 JUN 18, 2018@13:09:40

TECHNICAL LEAD IRM

REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

LASTNAME, FIRSTNAME MI####### DIETITION IRM

Comments

Validates

Attachments

**Step 58**

**Information Step**

Description\*

**Scenario 9:** Provider Active or DISUSERed and DEA is not expired, but will expire in <30 days

**Step 59**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date to <30 days.

Expected Results

A FileMan 22.2

Select OPTION: ENTER OR EDIT FILE ENTRIES

Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE

THEN EDIT FIELD:

Select DEA NUMBERS: BI####### EXPIRATION DATE: T+29 (JUL 17, 2018)

Select DEA NUMBERS: MI####### EXPIRATION DATE: T+29 (JUL 17, 2018)

Comments

Validates

Attachments

**Step 60**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access:

Comments

Validates

Attachments

**Step 61**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select Active. Expected Results

Report requires 132 Columns

Select one of the following: A Active

D DISUSERed

B Both

CPRS System Access: Active

Comments

Validates

Attachments

**Step 62**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select ‘<30-DAYS’ and verify the ‘DEA EXP DT’ field contains data that will expire in <30 days.

Expected Results

Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS 9 <90-DAYS Expiration Date Status: 3 <30-DAYS DEA EXPIRATION REPORT - Includes: Active Users and Expired/Expiring within nex t 30 days. Report Date: 03/12/2019 Page: 1 TERM DATE NAME DEA DEA EXP DT LAST S IGN-ON TITLE SERVICE/ SECTION --------------------------------------------------------------------------- ALPHA,PROVIDER K AP1234563 05/31/2018 03/11/

2019 SYSTEM ADMINISTRATOR BAY PINES TEST C REMARKS: TESTING REMARKS LABEL BENDER, CAROL L MD AB7922570 07/31/2018 04/06/ 2010

CLIONSKY, EMILYMARIE BG6857479 03/01/2019 11/28/ 2011 LEVY, DANIEL JONATHAN MD BL4476873 03/31/2019 01/31/ 2012 PHYSICIAN PRIMARY CARE SANGURIMA, JESSICA ELISE MD BS5606302 01/01/2019 08/08/ 2011

Comments

Validates

Attachments

**Step 63**

**Information Step**

Description\*

**Scenario 10:** Provider Active or DISUSERed and DEA is not expired, but will expire in <90 days.

**Step 64**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date to <90 days.

Expected Results

Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: NEW PERSON// DEA NUMBERS (5 entries) EDIT WHICH FIELD: ALL//

?? EDIT WHICH FIELD: ALL// EXPIRATION DATE THEN EDIT FIELD: Select DEA NUMBERS: BI####### EXPIRATION DATE: JUL 17,2018/

/ T+89 (SEP 15, 2018) Select DEA NUMBERS: MI####### EXPIRATION DATE: JUL 17,2018// T+89 (SEP 15, 2018) Select DEA NUMBERS: Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: DEA NUMBERS// NEW PERSON (67 entries) EDIT WHICH FIELD: ALL// 7

DISUSER THEN EDIT FIELD: Select NEW PERSON NAME: BI LASTNAME, FIRSTNAME BI TECHNICAL LEAD DISUSER: NO// Select

NEW PERSON NAME: MI####### LASTNAME, FIRSTNAME MLI DIETITION DISUSER: YES// Select NEW PERSON NAME:

Comments

Validates

Attachments

**Step 65**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System

Access: Comments

Validates

Attachments

**Step 66**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select Both.

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System

Access: Both

Comments

Validates

Attachments

**Step 67**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select ‘<90 DAYS’ and verify the ‘DEA EXP DT’ field contains data that will expire in <90 days.

Expected Results

Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS 9 <90-DAYS Expiration Date Status: 9 <90-DAYS DEA EXPIRATION REPORT - Includes: Active, DISUSER, and Expired/Expiring within

next 90 days. Report Date: 03/12/2019 Page: 1 TERM DATE NAME DEA DEA EXP DT LAST S IGN-ON TITLE SERVICE/SECTION --------------------------------------------------------------------------- ALPHA,PROVIDER K AP1234563 05/31/2018 03/11/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C REMARKS: TESTING REMARKS LABEL BENDER, CAROL L MD AB7922570 07/

31/2018 04/06/ 2010 CLIONSKY, EMILYMARIE BG6857479 03/01/2019 11/28/

2011 GUPTA, POONAM GR1234563 06/09/2019 03/04/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C KHAN,TANIA AK1234563 06/09/2019 03/12/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C

Comments

Validates

Attachments

**Step 68**

**Information Step**

Description\*

**Scenario 11:** Provider DISUSERed and DEA is expired.

**Step 69**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date to T-1 and DISUSER

Expected Results

VA FileMan 22.2 Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: NEW PERSON// DEA NUMBERS (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE THEN EDIT FIELD: Select DEA NUMBERS: BI#######

EXPIRATION DATE: SEP 15,2018// T-1 (JUN 17, 2018) Select DEA NUMBERS: MI####### EXPIRATION DATE: SEP 15,2018// T-2 (JUN 16,

2018) Select DEA NUMBERS: Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: DEA NUMBERS// NEW PERSON (67 entries) EDIT WHICH FIELD: ALL// 7 DISUSER THEN EDIT FIELD: Select NEW PERSON NAME: BI LASTNAME, FIRSTNAME BI TECHNICAL LEAD DISUSER: NO// Y YES Select NEW PERSON NAME: MI####### LASTNAME, FIRSTNAME MLI DIETITION DISUSER: YES// Select NEW PERSON NAME:

Comments

Validates

Attachments

**Step 70**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System

Access: DISUSERed

Comments

Validates

Attachments

**Step 71**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select DISUSERed.

Expected Results

Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS 9 <90-DAYS Expiration Date

Status:

Comments

Validates

Attachments

**Step 72**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select Expired.

Expected Results

DEVICE: HOME// HFS;132;66 Host File Server HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"// DEA EXPIRATION REPORT - Includes: DISUSER and EXPIRED.Report Date: 03/12/2019 Page: 1 TERM DATE NAME DEA DEA

EXP DT LAST S IGN-ON TITLE SERVICE/SECTION --------------------------------------------------------------------------- ALPHA,PROVIDER K AP1234563 05/31/2018 03/11/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C REMARKS: TESTING REMARKS LABEL GUPTA, POONAM GR1234563 06/09/2018 03/04/

2019 SYSTEM ADMINISTRATOR BAY PINES TEST C PABBISETTY, ANURADHA AY1234563 06/09/2018 03/11/ 2019

SYSTEM ADMINISTRATOR BAY PINES TEST C REMARKS: TESTING REMARKS LABEL Comments

Validates

Attachments

**Step 73**

**Information Step**

Description\*

**Scenario 12:** Provider DISUSERed and does not have a DEA expiration date.

**Step 74**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and delete the Expiration Date using the @ sign.

Expected Results

VA FileMan 22.2 Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: DEA NUMBERS// (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE THEN EDIT FIELD: Select DEA NUMBERS: BI####### EXPIRATION DATE: JUN 17,2018// @ SURE YOU WANT TO DELETE? Y (Yes) Select DEA NUMBERS: MI####### EXPIRATION DATE: JUN 16,2018// @ SURE YOU WANT TO DELETE? Y (Yes)

Select DEA NUMBERS: Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: DEA NUMBERS// NEW PERSON (67 entries) EDIT WHICH FIELD: ALL// 7 DISUSER THEN EDIT FIELD: Select NEW PERSON NAME: BI LASTNAME, FIRSTNAME BI TECHNICAL LEAD DISUSER: YES// Select NEW PERSON NAME: MI####### LASTNAME, FIRSTNAME MLI DIETITION DISUSER: YES// Select NEW PERSON NAME:

Comments

Validates

Attachments

**Step 75**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System

Access: DISUSERed

Comments

Validates

Attachments

**Step 76**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select DISUSERed

Expected Results

Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS

9 <90-DAYS Expiration Date Status: NO EXP DATE Comments

Validates

Attachments

**Step 77**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’, select ‘NO EXP DATE’ and verify the ‘DEA EXP DT’ field is left blank.

Expected Results

DEVICE: HOME// HFS;132;66 Host File Server HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"// DEA EXPIRATION REPORT - Includes: DISUSER and NO EXPIRATION DATE.Report Date: 03/12/2019 Page: 1 TERM DATE NAME DEA DEA EXP DT LAST S IGN-ON TITLE SERVICE/SECTION ---------------------------------------------------------------------------

GUPTA, POONAM GR1234563 03/04/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C PABBISETTY, ANURADHA AY1234563 03/11/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C REMARKS: TESTING REMARKS LABEL

Comments

Validates

Attachments

**Step 78**

**Information Step**

Description\*

**Scenario 13:** Provider DISUSERed and DEA is not expired, but will expire in <30 days.

**Step 79**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date to <30 days.

Expected Results

VA FileMan 22.2 Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: NEW PERSON// DEA NUMBERS (5 entries) EDIT WHICH FIELD: ALL// EXPIRATION DATE THEN EDIT FIELD: Select DEA NUMBERS: BI####### EXPIRATION DATE: T+15 (JUL 03, 2018) Select DEA NUMBERS: MI####### EXPIRATION DATE: T+15 (JUL 03, 2018) Select DEA NUMBERS: Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: DEA NUMBERS// NEW PERSON (67 entries) EDIT WHICH FIELD: ALL// 7 DISUSER THEN EDIT FIELD: Select NEW PERSON NAME: BI LASTNAME, FIRSTNAME BI TECHNICAL LEAD DISUSER: YES// Select NEW PERSON NAME: MI####### LASTNAME, FIRSTNAME MLI DIETITION DISUSER: YES// Select NEW PERSON NAME:

Comments

Validates

Attachments

**Step 80**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System

Access: Comments

Validates

Attachments

**Step 81**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select DISUSERed

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System

Access: DISUSERed

Comments

Validates

Attachments

**Step 82**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select ‘<30-DAYS’ and verify the ‘DEA EXP DT’ field contains data that will expire in <30 days.

Expected Results

Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS 9 <90-DAYS Expiration Date

Status: 3 <30-DAYS DEVICE: HOME// HFS;132;66 Host File Server HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS:

"WNS"// DEA EXPIRATION REPORT - Includes: DISUSER and Expired/Expiring within next 30 days. Report Date: 03/

12/2019 Page: 1 TERM DATE NAME DEA DEA EXP DT LAST S IGN-ON TITLE SERVICE/SECTION

--------------------------------------------------------------------------- ALPHA,PROVIDER K AP1234563 05/31/2018 03/11/ 2019

SYSTEM ADMINISTRATOR BAY PINES TEST C REMARKS: TESTING REMARKS LABEL GUPTA, POONAM GR1234563 04/10/2019 03/04/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C

Comments

Validates

Attachments

**Step 83**

**Information Step**

Description\*

**Scenario 14:** Provider DISUSERed and DEA is not expired, but will expire in <90 days.

**Step 84**

**Execution Step**

Description\*

From primary menu, navigate to ‘ENTER OR EDIT FILE ENTRIES’ and set the Expiration Date to <90 days.

Expected Results

VA FileMan 22.2 Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: NEW PERSON// DEA NUMBERS (5 entries)

EDIT WHICH FIELD: ALL// EXPIRATION DATE THEN EDIT FIELD: Select DEA NUMBERS: BI####### EXPIRATION DATE: JUL 3,2018// T+89 (SEP 15, 2018) Select DEA NUMBERS: MI####### EXPIRATION DATE: JUL 3,2018// T+80 (SEP 06, 2018) Select DEA NUMBERS: Select OPTION: ENTER OR EDIT FILE ENTRIES Input to what File: DEA NUMBERS// NEW PERSON (67 entries) EDIT WHICH FIELD: ALL// 7

DISUSER THEN EDIT FIELD: Select NEW PERSON NAME: BI LASTNAME, FIRSTNAME BI TECHNICAL LEAD DISUSER: YES// Select

NEW PERSON NAME: MI####### LASTNAME, FIRSTNAME MLI DIETITION DISUSER: YES// Select NEW PERSON NAME: Comments

Validates

Attachments

**Step 85**

**Execution Step**

Description\*

Exit out of FileMan then from primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

Select one of the following: A Active D DISUSERed B Both CPRS System Access: DISUSERed

Comments

Validates

Attachments

**Step 86**

**Execution Step**

Description\*

At the prompt ‘CPRS System Access:’, select DISUSERed .

Expected Results

Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS 9 <90-DAYS Expiration Date

Status: 9 <90-DAYS Comments

Validates

Attachments

**Step 87**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, select ‘<90 DAYS’ and verify the ‘DEA EXP DT’ field contains data that will expire in <90 days.

Expected Results

DEVICE: HOME// HFS;132;66 Host File Server HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/PARAMETERS: "WNS"// DEA EXPIRATION REPORT - Includes: DISUSER and Expired/Expiring within next 90 days. Report Date: 03/12/2019 Page: 1 TERM

DATE NAME DEA DEA EXP DT LAST S IGN-ON TITLE SERVICE/SECTION -------------------------------------

-------------------------------------- GUPTA, POONAM GR1234563 04/10/2019 03/04/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C

PABBISETTY, ANURADHA AY1234563 06/09/2019 03/11/ 2019 SYSTEM ADMINISTRATOR BAY PINES TEST C REMARKS: TESTING REMARKS LABEL

Comments

Validates

Attachments

**Step 88**

**Execution Step**

Description\*

From primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

1 DEA Expiration Date Report 2 Print Prescribers with Privileges 3 Print DISUSER Prescribers with Privileges 4 Print PSDRPH Key Holders 5 Print Setting Parameters Privileges 6 Print Audits for Prescriber Editing 8 Changes to DEA Prescribing Privileges Report 9 Allocation Audit of PSDRPH Key Report 10 Enter/Edit EPCS Access Reports Parameters 11 Allow VA Number if DEA Number Expired 12 Set Pharmacy Operating Mode 13 Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 89**

**Execution Step**

Description\*

Select 1 ‘DEA Expiration Date Report’ and press enter.

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System

Access:

Comments

Validates

Attachments

**Step 90**

**Execution Step**

Description\*

At the ‘CPRS System Access:’ prompt, type D (DISUSERed)

Expected Results

Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS 9 <90-DAYS Expiration Date

Status: Comments

Validates

Attachments

**Step 91**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, type 9 (<90-DAYS) and verify the request is queued.

Expected Results

DEVICE: HOME// QUEUE TO PRINT ON DEVICE: HOME// HFS;132;66 Host File Server HOST FILE NAME: C:\VISTA\TMP.DAT// ADDRESS/ PARAMETERS: "WNS"// Requested Start Time: NOW// (JUN 18, 2018@15:20:08) REQUEST QUEUED TASK=1384 VISTAGOLD> DEA EXPIRATION REPORT - Includes: DISUSER and EXPIRES IN LESS THEN 90 DAYS. Report Date: 06/18/2018 Page: 1 TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION ----------------

----------------------------------------------------------- LASTNAME, FIRSTNAME BI####### SEP 15, 2018 XI1956020 JUN 18,

2018@13:09:40 TECHNICAL LEAD IRM REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT.

LASTNAME, FIRSTNAME MI####### SEP 06, 2018

Comments

Validates

Attachments

**Step 92**

**Information Step**

Description\*

**Scenario 15:** The report can be mailed.

**Step 93**

**Execution Step**

Description\*

From primary menu, navigate to ‘ePCS DEA Utility Functions’ option.

Expected Results

1 DEA Expiration Date Report 2 Print Prescribers with Privileges 3 Print DISUSER Prescribers with Privileges 4 Print PSDRPH Key Holders 5 Print Setting Parameters Privileges 6 Print Audits for Prescriber Editing 8 Changes to DEA Prescribing Privileges Report 9 Allocation Audit of PSDRPH Key Report 10 Enter/Edit EPCS Access Reports Parameters 11 Allow VA Number if DEA Number Expired 12 Set Pharmacy Operating Mode 13 Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 94**

**Execution Step**

Description\*

Select 1 ‘DEA Expiration Date Report’ and press enter.

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System

Access: Comments

Validates

Attachments

**Step 95**

**Execution Step**

Description\*

At the ‘CPRS System Access:’ prompt, type D (DISUSERed)

Expected Results

Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS 9 <90-DAYS Expiration Date

Status: Comments

Validates

Attachments

**Step 96**

**Execution Step**

Description\*

At the ‘Expiration Date Status:’ prompt, type 9 (<90-DAYS) and verify the report is mailed.

Expected Results

Report requires 132 Columns Select one of the following: A Active D DISUSERed B Both CPRS System Access: DISUSERed Select one of the following: E EXPIRED N NO EXP DATE 3 <30-DAYS 9 <90- DAYS Expiration Date Status: 9 <90-DAYS DEVICE: HOME// MESSAGE

1 MESSAGE P-MESSAGE-HFS-MSM/DOS HFS (MSM/DOS) FILE => MESSAGE 2 MESSAGE P-MESSAGE-HFS-MSM/NT HFS (MSM/NT) FILE => MESSAGE 3 MESSAGE P-MESSAGE-HFS-OPENM-NT HFS (OpenM-NT) FILE => MESSAGE 4 MESSAGE P-MESSAGE-HFS-VXD HFS (VXD) FILE => MESSAGE Choose 1-4> 3 MESSAGE P-MESSAGE-HFS-OPENM-NT HFS (OpenM-NT) FILE => MESSAGE Subject: DEA EXP REPORT TEST Select one of the following: M Me P Postmaster From whom: Me// Send mail to: IRWIN,BENJAMIN// IRWIN,BENJAMIN Select basket to send to: IN// And Send to: Moving to MailMan message... ........................... Finished moving. Sending [339]... Sent

Comments

Validates

Attachments

**Step 97**

**Execution Step**

Description\*

Exit out of ‘ ePCS DEA Utility Functions’ and navigate to MailMan option.

Expected Results

VISTAGOLD>D ^XUP Setting up programmer environment This is a TEST account. Terminal Type set to: C-VT220 Select OPTION NAME: MAILMAN 1 MAILMAN MASTER MENU XMMASTER MailMan Master Menu 2 MAILMAN MENU XMUSER MailMan Menu

3 MAILMAN SITE PARAMETERS XMKSP MailMan Site Parameters CHOOSE 1-3: 2 XMUSER MailMan Menu VA MailMan 8.0 service for IRWIN.BENJAMIN@WWW.BMIRWIN.COM You last used MailMan: 06/18/18@15:43 You have no new messages. NML New Messages and Responses RML Read/Manage Messages SML Send a Message Query/Search for Messages AML Become a Surrogate (SHARED,MAIL or Other) Personal Preferences ... Other MailMan Functions ... Help (User/Group Info., etc.) ... Select MailMan Menu <TEST ACCOUNT> Option: RML Read/Manage Messages Read mail in basket: IN// (1 message) Last message number: 1 Messages in basket: 1 Enter ??? for help. IN Basket Message: 1// Subj: DEA EXP REPORT TEST [#339] 06/18/18@15:46 10 lines From: LASTNAME, FIRSTNAME In 'IN' basket. Page 1 --------------------------------------------------------------------------- DEA EXPIRATION REPORT - Includes: DISUSER and EXPIRES IN LESS THEN 90 DAYS.Re port Date: 06/18/2018 Page: 1

TERM DATE NAME DEA DEA EXP DT DETOX ID LAST SIGN-ON TITLE SERVICE/SECTION -----------

--------------------------------------------------------------- LASTNAME, FIRSTNAME BI####### SEP 15, 2018 XI1956020 JUN 18,

2018@15:43:33 TECHNICAL LEAD IRM REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. LASTNAME, FIRSTNAME MI####### SEP 06, 2018 DIETITION IRM REMARKS: This is another test provider. Enter message action (in IN basket): Ignore// DEA EXPIRATION REPORT - Includes: Active Users and Expired/Expiring within next 90 days.

Report Date: 07/16/2018 Page: 1 TERM DATE NAME DEA DEA EXP DT LAST SIGN-ON TITLE SERVICE/SECTION --------------------------------------------------------------------------- LASTNAME, FIRSTNAME BI####### 07/

20/2018 07/16/2018 SYSTEM REDESIGN COORDIN IRM REMARKS: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. IRWIN,VONNIE VI1998016 10/13/2018 07/16/2018

SYSTEM REDESIGN COORDIN IRM KETTERING MEDICAL CENTER GB1956020 08/15/2018 07/16/2018 SYSTEM REDESIGN COORDIN IRM

Comments

Validates

Attachments

**Step 98**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209884: CAS\_MPDU\_TC\_1.0.1.05 Add Reminder to TM Function for**



**Controlled Substances**

Creation Date: Jan 7, 2019 12:08:52 PM (UTC-06:00) Last Modified: Mar 8, 2019 8:39:07 AM (UTC-06:00) State: Draft

Originator: Paturi, Anuradha- (Ablevets) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_1.0.1.05 Add Reminder to TM Function for Controlled Substances

Description:

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

Log into your local vista instance.

Expected Results

User will be taken to the access/verify code prompts.

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

Enter your access/verify code(s).

Expected Results

User is taken to their primary menu

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Navigate to the menu option ‘outpatient Pharmacist Menu’ [PSO LMOE]

Expected Results

User is prompted for ‘Division’.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

When prompted for ‘Division’, select the division associated with your pharmacy system.

Expected Results

User is taken to the next prompt.

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

When prompted to ‘Select Label printer’, press <return>

Expected Results

User is taken to the next prompt.

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

When prompted ‘Right Margin’, press <return>

Expected Results

User is taken to the next prompt

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

If prompted ‘OK to assume label alignment is correct’, press <return>

Expected Results

User is taken to the next prompt

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

When prompted ‘Bingo Board Display:”, press <return>

Expected Results

User is taken to the next menu list for outpatient pharmacy

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Select Patient Option

Expected Results

Enter in the test patient

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

When prompted ‘ Would you like to select a secondary filter? N//, press <return>

Expected Results

The next outpatient pharmacy menu is displayed to the user

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Press Enter until you see the Patient Information Profile

Expected Results

User is taken to the next prompt

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Press <return> until you reach the medication list

Expected Results

User will be taken to the medication list.

**Medication Profile** Nov 16, 2017@12:21 Page: 1 of 1

LastName,FirstName

PID: XXX-XX-XXXX

Ht(cm): ( )

DOB: MAY XX,XXXX (32) Wt(kg): ( ) SEX: MALE

CrCL: <Not Found> BSA (m2):

ISSUE LAST REF DAY

# RX # DRUG QTY ST DATE FILL REM SUP

---------ACTIVE------------------------------------

1 2719142 ACETAMINOPHEN 325MG TAB 30 A> 11-15 11-15 11 30

2 800158636 ACYCLOVIR 800MG TAB 3 S> 11-13 11-16 0 30

3 800158635 CODEINE 30MG TAB 5 A 11-09 11-09 0 5

4 2719139$ DIAZEPAM 2MG TABLET 30 A> 11-09 11-09 5 30

5 2719141 LORAZEPAM 1MG TAB 57 A> 11-13 11-13 5 30

6 2719143 NIACIN 100MG TAB 30 A 11-15 11-15 11 30

7 2719115t SIMVASTATIN 10MG TAB 29 A> 10-27 10-27 11 30

Enter ?? for more actions

PU Patient Record Update NO New Order

PI Patient Information SO Select Order

Select Action: Quit//

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Select the ‘controlled substance’ prescription from the list of prescriptions that meets the pre-condition for this tests case. This can be done by selecting the number, or using ‘SO’ then entering the number of the prescription. Alternatively, you may select the number, and press <return>.

Select Action: Quit//5 press <return>

Expected Results

**OP Medications (ACTIVE)** Nov 16, 2017@12:26:40 Page: 1 of 4

LastName,FirstName

PID: XXX-XX-XXXX

Ht(cm): ( )

DOB: MAY XX,XXXX (32) Wt(kg): ( ) SEX: MALE

CrCL: <Not Found> BSA (m2):

Rx #: 2719141

(1) \*Orderable Item: LORAZEPAM TAB

(2) CMOP Drug: LORAZEPAM 1MG TAB NDC: 00008-0064-02

(3) \*Dosage: 1 (MG) Verb: TAKE

Dispense Units: 1

Noun: TABLET

\*Route: BY MOUTH

\*Schedule: QAM

\*Duration: 3 (DAYS)

\*Conjunction: THEN

+ Enter ?? for more actions

DC (Discontinue) PR Partial

RL Release

ED (Edit) RF Refill RN Renew

Select Action: Next Screen//

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Attempt to TM that not available in selections displayed

Select Action: Next Screen// TM

Expected Results

Do you want to MARK this Rx as 'Titration'?

**OP Medications (ACTIVE)** Nov 16, 2017@12:30:58 Page: 1 of 4

LastName,FirstName

PID: XXX-XX-XXXX

Ht(cm): ( )

DOB: MAY XX,XXXX (32) Wt(kg): ( ) SEX: MALE

CrCL: <Not Found> BSA (m2):

Rx #: 2719141

(1) \*Orderable Item: LORAZEPAM TAB

(2) CMOP Drug: LORAZEPAM 1MG TAB NDC: 00008-0064-02

(3) \*Dosage: 1 (MG) Verb: TAKE

Dispense Units: 1

Noun: TABLET

\*Route: BY MOUTH

\*Schedule: QAM

\*Duration: 3 (DAYS)

\*Conjunction: THEN

DC (Discontinue) PR Partial RL Release ED (Edit) RF Refill RN Renew Select Action: Next Screen// TM

The following message is displayed: NOTE: Marking this controlled substance Rx as a Titration prescription will prevent refills and renewals.

You will not be able to convert the Rx to a maintenance prescription by the TR Hidden Action.

Do you want to MARK this Rx as 'Titration'?

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

From step 13 repeat the process for a NON-CS Active drug

Expected Results

OP Medications (ACTIVE)Oct 09, 2018@12:14:36 Page:2 of 4

Lastname,Firstname

PID: ###-##-#### Ht(cm): DOB: MAR 12,1949 (69) Wt(kg):

( ) ( )

SEX: MALE

CrCL: <Not Found> (CREAT: 0.75mg/dL 1/26/12) BSA (m2):\_

+

SIG: TAKE ONE TABLET NOW FOR 2 DAYS, THEN TAKE ONE TABLET NOW

FOR 1 DAY FOR PAIN

(5) Patient Status: SC

(6) Issue Date: 10/09/18 (7)Fill Date: 10/09/18

Last Fill Date: 10/09/18 (Window)

Last Release Date: (8)Lot #:

Expires: 10/10/19 MFG:

(9) Days Supply: 90 (10) QTY (TAB): 350 QTY DSP MSG: FOR CMOP DISPENSE

IN MULTIPLES OF 100 BUT NOT MORE THAN 500

(11) # of Refills: 3

Remaining: 3

(12) Provider: Lastname,Firstname

(13) Routing: WINDOW (14) Copies: 1

+ Prescription must be RELEASED first.

Select Action: Next Screen//

At this point user will be asked to Release the prescription to go forward.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209885: CAS\_MPDU\_TC\_1.1.3.01 Auto-selection of Institutional DEA**



**number when using VA Number\_CPRS\_VistA**

Creation Date: Jan 7, 2019 12:10:02 PM (UTC-06:00) Last Modified: Feb 15, 2019 10:45:45 AM (UTC-06:00) State: Draft

Originator: Paturi, Anuradha- (Ablevets) Owner: Paturi, Anuradha- (Ablevets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_1.1.3.01 Auto-selection of Institutional DEA number when using VA Number\_CPRS\_VistA

Description: User Story : As a provider using a VA number as my authority to write controlled substance medication orders, I want the institutional DEA number to be selected based on the ordering location assigned to medication orders that I am writing, instead of using the DEA number associated to the location of my CPRS log on so that the correct DEA number-VA number combination is associated with medication order.

Acceptance Criteria:

1. I want the system updated to stop using the location associated with my CPRS log on when I am using VA number in place of a DEA number.

2. If I am using a VA number in place of a DEA number, I want the institutional DEA number for the location the controlled substance order is being written for automatically associated with the order.

For example: The provider writes a controlled substance medication order for a patient at the Joliet, Illinois CBOC while logged in from the Hines VA Hospital. The system should use the institutional DEA number for Joliet.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

Verify user has valid VA# and expired or no DEA#

Log into your local VistA instance using valid credentials

Expected Results

User logged in

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

At the option prompt type PSO Provider and then press Enter

Expected Results

A list of options is displayed.

1 PSO PROVIDER ADD Add New Providers

2 PSO PROVIDER EDIT Edit Provider

3 PSO PROVIDER INQUIRE View Provider

The Select Provider prompt is displayed.

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Type the name of the provider and then press Enter

Verify Provider has valid VA# and expired or no DEA#

Expected Results

The provider’s information is displayed.

Name: IRWIN,BENJAMIN Initials: BI

NON-VA Prescriber: No Tax ID:

Exclusionary Check Performed: Date Exclusionary List

Checked:

On Exclusionary List:

Exclusionary Checked By:

Authorized to Write Orders: Yes

Requires Cosigner: No

VA#123456

DEA#: BI1956020 DEA#: GB1956020-GB

DEA Expiration Date: Nov 13, 2018 DEA Expiration Date: Nov 13,

2018

Detox/Maintenance ID#: XI1956020 SCHEDULE II NARCOTIC: YES

SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES

SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES

SCHEDULE III NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES

SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES

SCHEDULE IV: YES SCHEDULE V: YES

SCHEDULE V: YES

DEA#: VI1998016-VI DEA#: ZI1999121

DEA Expiration Date: Nov 13, 2018 DEA Expiration Date: Nov 13,

2018

Type <Enter> to continue or '^' to exit:

Detox/Maintenance ID#: XI1998016 Detox/Maintenance ID#: XI1999121

SCHEDULE II NARCOTIC: YES SCHEDULE II NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE II NON-NARCOTIC: YES SCHEDULE III NARCOTIC: YES SCHEDULE III NARCOTIC: YES

SCHEDULE III NON-NARCOTIC: YES SCHEDULE III NON-NARCOTIC: YES SCHEDULE IV: YES SCHEDULE IV: YES

SCHEDULE V: YES SCHEDULE V: YES

Class: VA#: Type: FEE BASIS NPI#:

Remarks: THIS MY TEST PROVIDER THAT I KEEP CHANGING FOR EACH REPORT. Synonym(s): BEN, BI

Service/Section: IRM

Address: 1515 ANY STREET Phone:

Office: 423-531-4545

Room Loc: 777A

Type <Enter> to continue or '^' to exit:

Select Provider:

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Log into CPRS as Provider

Expected Results

The patient select prompt is shown (drop down)

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

At the patient prompt enter the name of a patient, select from the list and hit Enter

Expected Results

The main patient page is displayed

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Click on the Orders tab

Expected Results

The Orders main page is displayed

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Click on Meds, OutPatient (left hand side of page).

Expected Results

The Out patient Medications pop up page is displayed with a list of medications

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Choose a CS (eg, Morphine) medication

Note: Provider has valid VA#. Expired or No DEA number on file.

Expected Results

A list of possible options for the CS medication is displayed

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Select the right medication from the list

Expected Results

VA number selected by default and the institutional DEA number for the location the controlled substance order is being written for automatically associated with the order. It does not display the location associated with CPRS log on.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209886: CAS\_MPDU\_TC\_1.1.5.01 Prevent issuance of controlled substance prescriptions for patients without a Zip Code\_CPRS\_**



Creation Date: Jan 7, 2019 12:11:22 PM (UTC-06:00) Last Modified: Jan 14, 2019 12:11:42 PM (UTC-06:00) State: Draft

Originator: Paturi, Anuradha- (Ablevets) Owner: Paturi, Anuradha- (Ablevets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_1.1.5.01 Prevent issuance of controlled substance prescriptions for patients without a Zip Code\_CPRS\_ Description: User story:

As a prescriber of controlled substances, I want to be prevented from issuing controlled substance prescriptions that are missing the zip code in a U.S. patient’s address so that I am compliant with DEA regulation 21 CFR 1306.05(a) requiring a patient’s address.

Acceptance Criteria:

1. I want to be prevented from issuing electronic prescriptions for controlled substances.

a. If I attempt to submit the prescription for a patient without a known zip code on a U.S. (address), I want to receive the following error message

“Controlled substance prescriptions require a patient address. Please contact administrative support to update patient address information.”

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

Log into CPRS

Expected Results

The patient select prompt is shown

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

At the patient prompt enter the name of a patient.

Note: use the patient that was verified in FILEMAN that does not have a zip code

Expected Results

The main patient page is displayed

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Click on the Orders tab

Expected Results

The Orders main page is displayed

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Click on Meds, Outpatient (left hand side of page

Expected Results

The Outpatient Medications pop up page is displayed with a list of medications

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Choose a CS (eg, Morphine) medication and click OK

Expected Results

The following error message will be displayed: “Controlled substance prescriptions require a patient address. Please contact administrative support to update patient address information

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Navigate back to FILMAN and using the same test patient, add a zip code.

Expected Results

A zip code is now added to the patient’s profile

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Navigate back to CPRS and using the same test patient, repeat steps: 2-5

Expected Results

The CS prescription order can now be processed without error.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209887: CAS\_MPDU\_TC\_1.3.1.02 Require VA Provider select DEA Number for Outpatient Controlled Substance Prescriptions**



Creation Date: Jan 7, 2019 12:12:38 PM (UTC-06:00) Last Modified: Feb 15, 2019 10:50:15 AM (UTC-06:00) State: Draft

Originator: Paturi, Anuradha- (Ablevets) Owner: Paturi, Anuradha- (Ablevets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_1.3.1.02 Require VA Provider select DEA Number for Outpatient Controlled Substance Prescriptions, CAS\_MPDU\_TS\_1.3.1.03 Require selection of DEA number for Outpatient Controlled Substance Prescriptions (Paper Rx)

Description: User Story:

As a VA Provider, using CPRS to prescribe controlled substance medications, who has multiple DEA #s associated with my provider profile, I want to be able to select a DEA # from the DEA #s associated with my provider profile so that I can ensure that I associate the prescription to the correct DEA #.

Acceptance Criteria:

1. When prescribing a controlled substance medication, I want to be required to associate one of my DEA #s to the prescription. a. Removed

b. If there are multiple DEA #s that are valid for the drug being entered:

i. I want these messages to display:

“You have more than one valid DEA registration number.

Please select the correct DEA number for the prescription being entered.”

ii. I want the valid DEA #s to be represented as a drop-down radio button list with the DEA number and the full name of the state to which it is associated displayed for each entry.

iii. Any of my expired DEA #s that expired within the last year should be displayed in the list along with the expiration date and state. However, the expired DEA # cannot be selected.

Example:

FY5589532 ALABAMA Expired: 02/21/2018

iv. If any of my DEA #s is not valid for the specific drug, I want them to be displayed along with the schedule of the drug, but these DEA #s cannot be selected.

Example:

FY5589532 ALABAMA Not Valid for Schedule: XX

Note: The schedule displayed along with the DEA # is the schedule of the drug being ordered v. I do not want a DEA # to be selected or displayed by default.

vi. Upon selecting a DEA # from the drop-down list, the DEA #, Address, City, State, and Zip Code will be displayed for confirmation with an “OK” and

“Cancel” button.

vii. If the drug contains buprenorphine and it is not an exempted dosage form, I want the Detox # to be displayed for confirmation. viii. Prescription ordering may proceed only with a confirmed DEA # (OK button selected).

c. If I only have one DEA #, it is valid for the Rx being entered and I have no expired DEA #s:

i. I want it to default to that DEA #.

ii. I want the DEA #, Address, City, State, and Zip Code to be displayed.

iii. If the drug contains buprenorphine and it is not an exempted dosage form, I want the Detox # to be displayed for confirmation. e. If any of my DEA #s is expired, I want to be prevented from selecting an expired DEA #.

i. If the only DEA # on file is expired, they have a VA #, and Failover is set to NO, I want to receive the following error message: “The provider’s DEA

# on file has Expired and must be updated.” “The provider’s DEA# on file has expired. Please verify the DEA registration and contact an EPCS GUI

administrator to update the expiration date.”

ii. If the only DEA # on file is expired, they do not have a VA #, and Failover is set to YES, I want to receive the following error message: “The provider’s DEA # on file has Expired and must be updated.” “The provider’s DEA# on file has expired. Please verify the DEA registration and contact an EPCS GUI administrator to update the expiration date.”

f. If the VA# is being used because there are no DEA #s (not even an expired one):

i. I want to default to use of the VA# as a suffix, with the institutional DEA# as a prefix.

ii. The identification of the facility/institutional DEA# to choose is defined based on the clinic location in file #44 (HOSPITAL LOCATION) which identifies a facility DEA#.

iii. I want to show the combination institutional DEA # prefix - individual VA # suffix and Address

2. If the correct DEA number is not available for selection, I want to be able to cancel the prescription entry process.

3. (New) API needs to support old (only returning 1 DEA number) and new (CPRS can select from multiple DEA numbers) version of CPRS.

4. I want the selected DEA# to be stored in File #101.52 during signing to match current functionality.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

Scenario 1: User has multiple DEAs and Schedule set to Yes for the CS being ordered. One of the DEA# is expired within past year

Login to CPRS -> Select a Patient -> Go to Orders tab-> Select Meds, OutPatient

Expected Results

Out Patients Medications window displayed

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

Type the CS medication name and select from below list options displayed (ex - Morphine, Buprenorphine(needs Detox#) Click Ok

Expected Results

Select DEA # pop up window displayed with below information

“You have more than one valid DEA registration number.

Please select the correct DEA number for the prescription being entered.”

i. Multiple valid DEAs that the Provider has are displayed with Radio buttons to select from

ii.DEA # is not selected by default

iiiE. xpired DEA# is displayed. It's greyed out and Provider unable to select it.

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Select any DEA # (radio button) Expected Results

The DEA #, Address, City, State, and Zip Code are displayed for confirmation with an “OK” and

“Cancel” button.

If the medication being ordered is Buprenorphine then Detox# is displayed.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\* Select Cancel

Expected Results

DEA # pop up window closed and Out Patient Medications window displayed

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Repeat step 2 & 3 and Select Ok button

Expected Results

Prescription Ordering is proceeded

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Select dosage and other required information.

Accept Order

Expected Results

Order is created and is in Unreleased status

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\* Sign the Order

Expected Results

The correct DEA# is displayed on the Sign Order page. Order is changed to pending status

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Login to Vista and verify the DEA# is stored in File 101.52

VA FileMan 22.2

Select OPTION: 5 INQUIRE TO FILE ENTRIES

Output from what File: DRUG// 101.52 ORDER DEA ARCHIVE INFO (98 entries)

Select ORDER DEA ARCHIVE INFO CPRS ORDER NUMBER: `98 7226370

Another one:

Standard Captioned Output? Yes// (Yes)

Include COMPUTED fields: (N/Y/R/B): NO// - No record number (IEN), no Computed

Fields

Display Audit Trail? No// NO

Expected Results

CPRS ORDER NUMBER: 7226370

DIG SIG HASH: JjYfTkbIhkc+2mxZNmkQwqBKZsoY3+Hu0+MfLOrBB/w= ISSUANCE DATE: JAN 18, 2019 DRUG NAME: MORPHINE SO4 15MG TAB DISPENSE DRUG: MORPHINE SO4 15MG TAB DEA SCHEDULE: 2APW

QTY PRESCRIBED: 150 # OF REFILLS: 0

DIRECTIONS FOR USE (SIG): 15&MG&1&TABLET&15MG&2596|5XD|||1

DEA #: AF1234563 PROVIDER NAME: PATURI,ANURADHA PROVIDER: PATURI,ANURADHA

PROVIDER ADDRESS #1: VA CNTRL WSTRN MASSCHUSETS HCS PROVIDER ADDRESS #2: 421 NORTH MAIN STREET

PROVIDER CITY: LEEDS PROVIDER STATE: MASSACHUSETTS PROVIDER ZIP+4: 01053-9764 PATIENT NAME: AAS,NED A PATIENT: AAS,NED A ICN: 1002910161V729294

PATIENT ADDRESS #1: 7943 MOUNT HOOD PATIENT CITY: HUBER HEIGHTS PATIENT STATE: OHIO PATIENT ZIP+4: 45424

STACK: >>RESTART+3

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Scenario 2 : Provider only one DEA#. No expired or invalid DEA#s

Repeat steps 1 & 2

Expected Results

The only DEA# is displayed and the radio button is selected by default. Address with Zipcode is displayed. If the CS drug is Buprenorphine, Detox# is required and is displayed.

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Scenario 3: The only DEA # on file is expired, they have a VA #, and Failover is set to NO Login to CPRS and Repeat steps 1 & 2

Expected Results

The following error message is displayed

: “The provider’s DEA # on file has Expired and must be updated.” “The provider’s DEA# on file has expired. Please verify the DEA registration and contact an EPCS GUI administrator to update the expiration date.”

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Scenario 4: the only DEA # on file is expired, they have no VA #, and Failover is set to Yes

Login to CPRS and Repeat steps 1 & 2

Expected Results

The following error message is displayed

: “The provider’s DEA # on file has Expired and must be updated.” “The provider’s DEA# on file has expired. Please verify the DEA registration and contact an EPCS GUI administrator to update the expiration date.”

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Scenario 5: Provider has no DEA#(not even expired one) and has a valid VA# Login to CPRS and repeat steps 1&2

Expected Results

. Radio button is selected for the VA# as a suffix, with the institutional DEA# as a prefix.

The identification of the facility/institutional DEA# to choose is defined based on the clinic location in file #44 (HOSPITAL LOCATION) which identifies a facility DEA#.

Shows the combination institutional DEA # prefix - individual VA # suffix and Address

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

**Scenario 6: the onlyDEA # on file is expired, they have VA #, and Failover is set to Yes**

Login to CPRS and Repeat steps 1 & 2

Expected Results

Provider able to proceed with the Order. No error displayed.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209888: CAS\_MPDU\_TC\_1.3.1.07\_Select DEA num on Check Provider ePCS Configuration Option (DEA)**



Creation Date: Jan 7, 2019 12:13:46 PM (UTC-06:00) Last Modified: Feb 15, 2019 11:07:47 AM (UTC-06:00) State: Draft

Originator: Paturi, Anuradha- (Ablevets) Owner: Paturi, Anuradha- (Ablevets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_1.3.1.07\_Select DEA num on Check Provider ePCS Configuration Option (DEA) Description: User Story:

As a VA representative that credentials providers and/or updates DEA number information using ePCS, I want the ability to select the DEA # associated with the provider for which I want to see details when I query the provider using the “Check Provider ePCS Configuration” option [OR EPCS PROVIDER CONFIG CHECK].

Acceptance Criteria:

1. If the provider has only 1 DEA #, I want the current messages appropriate to that DEA # to be displayed.

2. If the provider has multiple DEA #s:

a. I want this message to display:

“This provider has multiple DEA registrations. Please select the DEA number you wish to check:”

b. I want the DEA #s on the provider’s profile to be displayed along with a numeric identifier, and the full name of the state to which they are associated. c. I want a prompt to display “Choose 1-x: “where “x” is the number of the last choice.

d. I do not want a default DEA # to be selected or displayed.

e. After the user chooses the desired DEA #, I want the messages appropriate for the provider and the selected DEA # to be displayed. i. Example 1 (Provider has 1 DEA #):

Select the provider: LASTNAME,FIRSTNAME M TEA

This provider is not able to write controlled substance orders for the following reasons: Does not hold the ORES security key.

Is not an ENABLED USER in the OE/RR EPCS PARAMETERS file. Is not authorized to write medication orders.

User cannot sign on.

Once all of the issues above are resolved, the provider is permitted to prescribe schedule II NARCOTIC. Select the provider:

ii. Example 2 (Provider has multiple DEA#s):

Select the provider: LASTNAME,FIRSTNAME M TEA

This provider has multiple DEA registrations. Please select the DEA number you wish to check:

1 FY5589532 ALABAMA

2 FY1234819 ILLINOIS Choose 1-2: 2

Using DEA # FY1234819, this provider is not able to write controlled substance orders for the following reasons: Does not hold the ORES security key.

Is not an ENABLED USER in the OE/RR EPCS PARAMETERS file. Is not authorized to write medication orders.

User cannot sign on.

Once all of the issues above are resolved, the provider is permitted to prescribe schedule II NARCOTIC. Select the provider:

iii. Example 3 (Provider has multiple DEA #s):

Select the provider: LASTNAME,FIRSTNAME M TEA

This provider has multiple DEA registrations. Please select the DEA number you wish to check:

1 FY5589532 ALABAMA

2 FY1234819 ILLINOIS Choose 1-2: 1

Using DEA # FY5589532, this provider is able to write controlled substance orders and is permitted to prescribe schedules III NARCOTIC, III NON-NARCOTIC, IV and V.

Select the provider:

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

**Scenario 1: User has multiple DEAs and Schedule set to Yes for the CS being ordered. One of the DEA# is expired**

Login to CPRS -> Select a Patient -> Go to Orders tab-> Select Meds, OutPatient

Expected Results

Out Patients Medications window displayed

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

Type the CS medication name and select from below list options displayed (ex - Morphine, Buprenorphine non permitted dosage(needs Detox#)

Click Ok

Expected Results

Select DEA # pop up window displayed with below information

“You have more than one valid DEA registration number.

Please select the correct DEA number for the prescription being entered.”

i.Multiple valid DEAs that the Provider has are displayed with Radio buttons to select from ii.DEA # is not selected by default

iii.Expired DEA# is displayed. It's greyed out and Provider unable to select it.

Add CPRS screenshots

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Select any DEA # (radio button)

Expected Results

The DEA #, Address, City, State, and Zip Code are displayed for confirmation with an “OK” and “Cancel” button.

If the medication being ordered is Buprenorphine non permitted dose then Detox# is displayed.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Select Cancel

Expected Results

DEA # pop up window closed and Out Patient Medications window displayed

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Repeat step 2 & 3 and Select Ok button

Expected Results

Prescription Ordering is proceeded

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

**Scenario 2 : Provider only one DEA#. No expired or invalid DEA#s. Provider has access to the Schedule of the CS drug ordered**

Repeat steps 1 & 2

Expected Results

The only DEA# is displayed and the radio button is selected by default. Address with Zipcode is displayed

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**209889: CAS\_MPDU\_TC\_1.3.5.02\_CPRS Messages for Fail Over**



**Functionality**

Creation Date: Jan 7, 2019 12:15:13 PM (UTC-06:00) Last Modified: Jan 28, 2019 11:59:40 AM (UTC-06:00) State: Draft

Originator: Paturi, Anuradha- (Ablevets) Owner: Paturi, Anuradha- (Ablevets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TC\_1.3.5.02\_CPRS Messages for Fail Over Functionality

Description: User Story:As a provider ordering Controlled Substance medication in CPRS at a site where the fail over functionality has been turned off, I

want an accurate message to inform me if my DEA # is expired so that I can take remedial action. Acceptance Criteria:

Acceptance Criteria:

1. If the new site level parameter to prevent the use of the "Fail Over" functionality is set to “NO” at my site, and I have an expired DEA# and a VA#

present, I want to see the following error message:

“The provider’s DEA# on file has expired. Please verify the DEA registration and contact an EPCS GUI administrator to update the expiration date.”

2. If the new site level parameter to prevent the use of the "Fail Over" functionality is set to “NO” at my site, and I have an expired DEA# and I do not have a VA#, I want the current message to continue to display:

“You have an expired DEA # and no VA # is assigned.”

3. If the new site level parameter to prevent the use of the "Fail Over" functionality is set to “NO” at my site, and I have a current DEA#, and I have privileges for the controlled substance schedule of the medication being ordered, no error message displays.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Execution Step**

Description\*

Log in to your Vista instance

Expected Results

The primary VistA menu is displayed

Comments

Validates

Attachments

**Step 2**

**Execution Step**

Description\*

Navigate to PSO ePCS menu

Go to : PSO EPCS EXPIRED DEA FAILOVER Allow VA Number if DEA Number Expir ed

Press <Enter> to see more, '^' to exit this list, OR

CHOOSE 1-5: 5 PSO EPCS EXPIRED DEA FAILOVER Allow VA Number if DEA Number E

xpired

Allow VA Number if DEA Number Expired

Setting Allow VA Number if DEA Number Expired for System: NHML28.FO-BAYPINES.M ED.VA.GOV

Value: NO//

Expected Results

Failover Flag is set to No

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Log in into CPRS as Provider

Expected Results

The CPRS cover sheet is displayed prompting to select a patient

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Select Patient and click Ok

Expected Results

Patient information displayed.

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Go to Orders tab -> Out Patient Meds -> Enter the CS name and click Ok

Scenario 1: Provider have an expired DEA# and a VA# present

Scenario 2: Provider have an expired DEA# and I do not have a VA

Scenario 3: Providerhave a current DEA#,and I have privileges for the controlled substance schedule of the medication being ordered

Expected Results

The below error message is displayed based on the above Scenario criteria :

Scenario 1 error message: “The provider’s DEA# on file has expired. Please verify the DEA registration and contact an EPCS GUI

administrator to update the expiration date.”

Scenario 2 error message :“You have an expired DEA # and no VA # is assigned.” Scenario 3 : No error message. Provider able to Process the order

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**210588: CAS\_MPDU\_TS\_1.2.1.02 | Remove DEA Expiration Reports**



Creation Date: Jan 11, 2019 1:16:15 PM (UTC-06:00) Last Modified: Mar 27, 2019 8:56:03 AM (UTC-05:00) State: Under Review

Originator: Khan, Tania (Accenture) Owner: Khan, Tania (Accenture) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.2.1.02 | Remove DEA Expiration Reports

Description: Verify the existing DEA Expiration Reports gets removed upon creation of the new single DEA Expiration Date Report.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

• Access to VistA

**Step 2**

**Execution Step**

Description\*

Log into your local vista instance

Expected Results

User will be taken to the access/verify code prompts

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

From the primary menu, navigate to “ePCS DEA Utility Functions” option.

Expected Results

VISTAGOLD>D ^XUP

1.DEA Expiration Date Report

2.Print Prescribers with Privileges

3.Print DISUSER Prescribers with Privileges

4.Print PSDRPH Key Holders

5.Print Setting Parameters Privileges

6.Print Audits for Prescriber Editing

1.Changes to DEA Prescribing Privileges Report

2.Allocation Audit of PSDRPH Key Report

3.Enter/Edit EPCS Access Reports Parameters

4.Allow VA Number if DEA Number Expired

5.Set Pharmacy Operating Mode

6.Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Attempt to search for the following reports in PSO EPCS DEA Utility Functions option:

a.Print DEA Expiration Date Null

b.Print DISUSER DEA Expiration Date Null c.Print DEA Expiration Date Expires 30 days

d.Print DISUSER DEA Expiration Date Expires 30 days

Expected Results

The following reports will be displayed as below as it has been removed from the ‘PSO EPCS DEA Utility

Functions’ option.

Select PSO EPCS DEA Utility Functions <TEST ACCOUNT> Option: Print DEA Expiration Da te Null??

Comments

Validates

Attachments

**Step 5**

**Information Step**

Description\*

**End of test.**

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**210971: CAS\_MPDU\_TS\_1.1.2.08 | Migrate Existing DEA # information from New Person File into DEA file**



Creation Date: Jan 14, 2019 6:44:27 PM (UTC-06:00) Last Modified: Apr 12, 2019 11:17:59 AM (UTC-05:00) State: Draft

Originator: Khan, Tania (Accenture) Owner: Gupta, Poonam (AbleVets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.1.2.08 | Migrate Existing DEA # information from New Person File into DEA file

Description: As a VA pharmacist, I need one-time automated process that compares the existing DEA number information stored as part of the provider profile against the new DEA file to automatically populate the first DEA record on existing providers so that I am not required to manually update all the existing providers in VistA upon implementation of the new DEA number file.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

• Access to Fileman

• Must have the PSDMGR (Pharmacy/Manager key) to view the Exception Log

Note:

All the data should be created for the listed providers mentioned above before running the test.

**Step 2**

**Execution Step**

Description\*

Follow the patch installation steps:

Select OPTION NAME: XPD MAIN Kernel Installation & Distribution System

Edits and Distribution ...

Utilities ... Installation ...

Patch Monitor Main Menu ...

You have PENDING ALERTS

Enter "VA to jump to VIEW ALERTS option

Select Kernel Installation & Distribution System <TEST ACCOUNT> Option: Installa tion

1 Load a Distribution

2 Verify Checksums in Transport Global

3 Print Transport Global

4 Compare Transport Global to Current System

5 Backup a Transport Global

6 Install Package(s)

Restart Install of Package(s) Unload a Distribution

Select Installation <TEST ACCOUNT> Option: 2 Verify Checksums in Transport Global

Select INSTALL NAME: PSO\*7.0\*529 4/11/19@17:40:14

=> PSO\*7\*529 TEST v13

This Distribution was loaded on Apr 11, 2019@17:40:14 with header of

PSO\*7\*529 TEST v13

It consisted of the following Install(s): PSO\*7.0\*529

Checking Install for Package PSO\*7.0\*529

Will first run the Environment Check Routine, PSO7E529

Select one of the following: P PRODUCTION

D PRE-PROD S SQA

ENVIRONMENT TYPE: PRODUCTION

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* The Environmental Check Routine finished Successfully.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Select one of the following: P PRODUCTION

D PRE-PROD S SQA

ENVIRONMENT TYPE: D PRE-PROD

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* The Environmental Check Routine finished Successfully.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Select one of the following: P PRODUCTION

D PRE-PROD S SQA

ENVIRONMENT TYPE: SQA

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* The Environmental Check Routine finished Successfully.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Expected Results

Patch successfully installed.

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Log into your local vista instance.

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

From primary menu, Navigate to VA FileMan

Expected Results

The ‘Select OPTION’ prompt is displayed. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Type ‘INQUIRE TO FILE ENTRIES’ and then press Enter.

Expected Results

The ‘Input from what File: DEA NUMBERS//’ prompt is displayed. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Type 200 and press Enter.

Expected Results

The ‘Select NEW PERSON NAME:’ prompt is displayed. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Type New Person Name and press Enter to continue.

Expected Results

The ‘Another one:’ prompt is displayed. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘Standard Captioned Output? Yes// (Yes)’ prompt is displayed.

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘Include COMPUTED fields:’ prompt is displayed. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘Display Audit Trail?’ prompt is displayed. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Press Enter to continue. Expected Results

ASK DEVICE TYPE AT SIGN-ON: ASK AUTO MENU: YES, MENUS GENERATED

TYPE-AHEAD: ALLOWED TIMED READ (# OF SECONDS): 9999

PRIMARY MENU OPTION: EVE SECID: 1034245457

SUBJECT ORGANIZATION: Department Of Veterans Affairs

SUBJECT ORGANIZATION ID: urn:oid:2.16.840.1.113883.4.349

UNIQUE USER ID: 1034245457 ADUPN: poonam.gupta@va.gov

SUBJECT ALTERNATIVE NAME: poonam.gupta@va.gov

CPRS TAB: COR EFFECTIVE DATE: AUG 14, 2018

CPRS TAB: RPT EFFECTIVE DATE: AUG 14, 2018

AUTHORIZED TO WRITE MED ORDERS: YES PROVIDER TYPE: FULL TIME

SCHEDULE II NARCOTIC: Yes SCHEDULE II NON-NARCOTIC: Yes

SCHEDULE III NARCOTIC: Yes SCHEDULE III NON-NARCOTIC: Yes

SCHEDULE IV: Yes SCHEDULE V: Yes

DEA NUMBER: AG1234563

DEA EXPIRATION DATE: JAN 12, 2046

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Verify data is available for provider 1 and 2 in file 200 and the new DEA file.

Expected Results

Data will be available for both providers in file 200 and the new DEA file. Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Verify there is no error in the exception log for **providers 1, 2 & 13.**

Provider 1 result:

New Record written to 8991.9 for the provider with the DEA # and schedules that were found in File #200. Data remains in File #200.

Provider 2 result:

New Record written to 8991.9 for the provider with the DEA # and Detox #. Data remains in File #200. Business

Activity Code/Subcode generate same Detox # found in File #200.

Provider 13 result:

Existing data remains in File #200. No new record is written to 8991.9 for this provider. A record is written to the

Migration Log. Processing continues to the next record.

Expected Results

Exception log will have no errors for providers 1 and 2.

Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Verify the errors in the exception log in email for the rest of the providers.

Expected Results

The report will be delivered via email.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**211674: CAS\_MPDU\_TC\_ 1.0.1.02 | Restrict Kernel Key “PSDRPH”**



**allocation from being set up as un-auditable**

Creation Date: Jan 21, 2019 1:58:36 PM (UTC-06:00) Last Modified: Jan 22, 2019 6:58:01 AM (UTC-06:00) State: Draft

Originator: Gupta, Poonam (AbleVets) Owner: Type: Manual

Test Data: Unassigned

Description: This test case is for a VA representative responsible for allocating the Kernel Key “PSDRPH”, I want to be required to allocate the key through an auditable path so that I am not in violation of DEA regulations. The test case should contain all system activities that have significance to the VA representative.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to IOC Test Sites:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

Must be able to allocate and de-allocate keys

**Notes:**

**All data is for demonstration purposes only and not to taken as actual values**

This key is used to identify pharmacist allowed to act on controlled substances. DEA requires that tracking of the permission is audited. This is a kernel change, cannot be given via the regular path and can only be given through the auditable pathway which is the PSO EPCS PSDRPH KEY Allocate/De-Allocate.

*The pharmacy application provider must establish and implement a list of auditable events. The auditable events must, at a minimum, include the following:*

*(4) Any setting of or change to logical access controls related to the dispensing of controlled substance prescriptions.*

**Step 2**

**Information Step**

Description\*

**Scenario 1:**

When the user selects the PSDRPH Key from the “XUKEYALL Allocation of Security Keys” function, verify the following error message “The PSDRPH key cannot be allocated / de-allocated by this option. Please use the option 'Allocate/De- Allocate of PSDRPH Key'." is displayed.

**Step 3**

**Execution Step**

Description\*

Log into your local vista instance

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Navigate to EVE (Systems Manager Menu) option.

Expected Results

Core Applications ...

Device Management ... FM VA FileMan ...

Menu Management ... Programmer Options ... Operations Management ... Spool Management ...

Information Security Officer Menu ... Taskman Management ...

User Management ... Application Utilities ... Capacity Planning ...

HL7 Main Menu ... Manage Mailman ...

VDEF Configuration and Status ...

You have PENDING ALERTS

Enter "VA to jump to VIEW ALERTS option

Select Systems Manager Menu <TEST ACCOUNT> Option:

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Select “Menu Management ...” option from the list.

Expected Results

Select Systems Manager Menu <TEST ACCOUNT> Option: Menu management

Edit options

Key Management ...

Secure Menu Delegation ... Restrict Availability of Options Option Access By User

List Options by Parents and Use

Fix Option File Pointers

Help Processor ...

OPED Screen-based Option Editor Display Menus and Options ... Menu Rebuild Menu ...

Out-Of-Order Set Management ...

See if a User Has Access to a Particular Option

Show Users with a Selected primary Menu

You have PENDING ALERTS

Enter "VA to jump to VIEW ALERTS option

Select Menu Management <TEST ACCOUNT> Option

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Select “Key Management…”

Expected Results

Select Menu Management <TEST ACCOUNT> Option: Key Management

Allocation of Security Keys

De-allocation of Security Keys

Enter/Edit of Security Keys

All the Keys a User Needs

Allocate/De-Allocate Exclusive Key(s)

Change user's allocated keys to delegated keys

Delegate keys

Keys For a Given Menu Tree

List users holding a certain key

Remove delegated keys

Show the keys of a particular user

You have PENDING ALERTS

Enter "VA to jump to VIEW ALERTS option

Select Key Management <TEST ACCOUNT

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Select “Allocation of Security Keys”.

Expected Results

Select Key Management <TEST ACCOUNT> Option: Allocation of Security Keys Allocate key: Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

At the “Allocate key:” prompt, type PSDRPH and then press Enter.

Expected Results

Select Key Management <TEST ACCOUNT> Option: Allocation of Security Keys Allocate key: PSDRPH The PSDRPH key cannot be allocated / de- allocated by this option. Please use the option 'Allocate/De-Allocate of PSDRPH Key'.

Comments

Validates

Attachments

**Step 9**

**Information Step**

Description\*

**Scenario 2:** When the user selects to de-allocate the PSDRPH Key from the “XUKEYDEALL De-Allocation of Security Keys” function, verify the following error message “The PSDRPH key cannot be allocated / de-allocated by this option. Please use the option 'Allocate/De-Allocate of PSDRPH Key'." is displayed.

**Step 10**

**Execution Step**

Description\*

Navigate back to the “Select Key Management Option:”

Expected Results

The Option prompt is displayed.

Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

At the Option prompt type “De-Allocation of Security Keys” and then press Enter.

Expected Results

Select Key Management <TEST ACCOUNT> Option: De-allocation of Security Keys De-allocate key: Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

At the “De-allocate key:” prompt, type PSDRPH and then press Enter.

Expected Results

De-allocate key: PSDRPH The PSDRPH key cannot be allocated / de-allocated by this option. Please use the option 'Allocate/De-Allocate of

PSDRPH Key'. Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**212400: CAS\_MPDU\_TS\_1.3.1.01 Verify provider-controlled substance schedule permissions for inpatient orders.**



Creation Date: Jan 28, 2019 10:23:50 AM (UTC-06:00) Last Modified: Mar 27, 2019 9:40:51 AM (UTC-05:00) State: Approved

Originator: Khan, Tania (Accenture) Owner: Gupta, Poonam (AbleVets)

Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.3.1.01 Verify provider-controlled substance schedule permissions for inpatient orders. Description: Scenario 1: Verify the “USE FOR INPATIENT ORDERS?” flag is set to “YES”.

Scenario 2: Receive an error message when a controlled substance with a schedule that is not authorized for the provider to prescribe for the DEA # is selected.

Scenario 3: Does not receive an error message when a controlled substance with a schedule that is authorized for the provider to prescribe for the DEA

# is selected.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

All data is for demonstration purposes only and not to be taken as actual values

**Step 2**

**Execution Step**

Description\*

Log into your local VistA instance

Expected Results

User will be taken to the access/verify code prompts

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

From primary menu, navigate to “VA FileMan ... [DIUSER]”

Expected Results

VA FileMan Version 22.2

Enter or Edit File Entries

Print File Entries Search File Entries Modify File Attributes Inquire to File Entries Utility Functions ...

Data Dictionary Utilities ... Transfer Entries

Other Options ... Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Type INQ and then press Enter.

Expected Results

The ‘Output from what File: prompt is displayed. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Type DEA NUMBERS and then press Enter.

Expected Results

The Select DEA NUMBERS: prompt is displayed.

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Type a DEA number and then press Enter.

Expected Results

The ‘Another one’ prompt is displayed. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The Standard Captioned Output? Yes//’ prompt is displayed. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The ‘Include COMPUTED fields:’ prompt is displayed

Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Type B and then press Enter.

Expected Results

NUMBER: 103 DEA NUMBER: GR1234563

BUSINESS ACTIVITY CODE: C9 DETOX NUMBER: XR1234563

EXPIRATION DATE: MAY 31, 2020 USE FOR INPATIENT ORDERS?: YES TYPE: INDIVIDUAL

NAME (PROVIDER OR INSTITUTION): GUPTA, POONAM

STREET ADDRESS 1: 7300 MAIN STREET STREET ADDRESS 2: ADDRESS STREET7322

STREET ADDRESS 3: ARRDESS STREET7323 CITY: PLANO STATE: TEXAS ZIP CODE: 75025

SCHEDULE II NARCOTIC?: NO SCHEDULE II NON-NARCOTIC?: YES SCHEDULE III NARCOTIC?: NO SCHEDULE III NON-NARCOTIC?: NO SCHEDULE IV?: YES SCHEDULE V?: YES

LAST UPDATED BY: GUPTA,POONAM

LAST UPDATED DATE/TIME: JAN 29, 2019@15:06:04

Comments

Validates

Attachments

**Step 10**

**Information Step**

Description\*

**Scenario 2**: Receive an error message when a controlled substance with a

schedule that is not authorized for the provider to prescribe for the DEA # is selected.

**Step 11**

**Execution Step**

Description\*

Log into your local VistA instance

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Navigate to “Inpatient Order Entry [PSJ OE]” and then press Enter.

Expected Results

The Select Patient prompt is displayed. Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Type the name of a patient and then press Enter.

Expected Results

The Patient Information screen is displayed.

Patient Information Nov 28, 2018@15:20:40 Page: 1 of 1

Last, First Last Ward: 1W

PID: ###-##-#### Last Room-Bed: 227-B-12U Ht(cm): ( ) DOB: 05/30/55 (63) Wt(kg): ( )

Sex: MALE Last Admitted: 09/19/95

Dx: DEPRESSION Discharged: 09/27/95

CrCL: <Not Found> (CREAT: 0.92mg/dL 8/25/11) BSA (m2):

Allergies/Reactions: NKA Adverse Reactions:

Inpatient Narrative: Outpatient Narrative:

Enter ?? for more actions

DA Detailed Allergy/ADR List IN Intervention Menu

VP View Profile

Select Action: View Profile// View Profile

SHORT, LONG, or NO Profile? SHORT// LONG Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Create a new order for a controlled substance and

verify the error message is displayed for the provider for Federal Schedule 3 order. Expected Results

PROVIDER: GUPTA,POONAM//

Provider not authorized to prescribe medications in Federal Schedule 3. Please contact the provider.

Comments

Validates

Attachments

**Step 15**

**Information Step**

Description\*

Scenario 3: Does not receive an error message when a controlled substance with a schedule that is authorized for the provider to prescribe

for the DEA # is selected.

**Step 16**

**Execution Step**

Description\*

Navigate back to FileMan

Expected Results

The Select OPTION prompt is displayed. Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Type Enter and then press Enter.

Expected Results

The Input to what File: DEA NUMBERS// prompt is displayed. Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Press Enter to continue.

Expected Results

The EDIT WHICH FIELD: ALL// prompt is displayed. Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Type a DEA number and then press Enter. Press ENTER for the rest of the prompts, stopping at the SCHEDULE III, change the NO to a YES.

Expected Results

The providers DEA information is displayed. DEA NUMBER: AV######//

BUSINESS ACTIVITY CODE: B5// DETOX NUMBER: ####### EXPIRATION DATE: AUG 31,2019// DEA NUMBER SUFFIX:

USE FOR INPATIENT ORDERS?: NO// TYPE: INSTITUTIONAL//

NAME (PROVIDER OR INSTITUTION): EDWARD HINES JR VA HOSPITAL Replace

STREET ADDRESS 1: VAMC-//

STREET ADDRESS 2: 5000 S 5TH AVE//

STREET ADDRESS 3: BLDG 200, ROOM B109 PHARMACY SERVICE Replace

CITY: HINES// STATE: ILLINOIS//

ZIP CODE: 601410000// SCHEDULE II NARCOTIC?: YES// SCHEDULE II NON-NARCOTIC?: YES// SCHEDULE III NARCOTIC?: NO//YES

SCHEDULE III NON-NARCOTIC?: YES// SCHEDULE IV?: YES//

SCHEDULE V?: YES//

LAST UPDATED BY: VISSER,SHARON J //

LAST UPDATED DATE/TIME: NOV 9,2018@10:30:47// LAST DOJ UPDATE DATE/TIME:

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Create a new Controlled Substance Order using above steps and the “Inpatient Order Entry [PSJ OE]” option to verify the message is not received for schedule III.

Expected Results

The user will not see the message. Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216222: CAS\_MPDU\_TS\_1.3.1.03 Require selection of DEA number for**



**Outpatient Controlled Substance Prescriptions (Paper Rx)**

Creation Date: Feb 7, 2019 3:20:50 PM (UTC-06:00) Last Modified: Apr 15, 2019 12:20:40 PM (UTC-05:00) State: Under Review

Originator: Gupta, Poonam (AbleVets) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied From:CAS\_MPDU\_TC\_1.3.1.02 Require VA Provider select DEA Number for Outpatient Controlled Substance Prescriptions

Copied To:Copy of CAS\_MPDU\_TS\_1.3.1.03 Require selection of DEA number for Outpatient Controlled Substance Prescriptions (Paper Rx)

Description: User Story:

As a VA Provider, using CPRS to prescribe controlled substance medications, who has multiple DEA #s associated with my provider profile, I want to be able to select a DEA # from the DEA #s associated with my provider profile so that I can ensure that I associate the prescription to the correct DEA #.

Acceptance Criteria:

1. When prescribing a controlled substance medication, I want to be required to associate one of my DEA #s to the prescription. a. Removed

b. If there are multiple DEA #s that are valid for the drug being entered:

i. I want these messages to display:

“You have more than one valid DEA registration number.

Please select the correct DEA number for the prescription being entered.”

ii. I want the valid DEA #s to be represented as a drop-down radio button list with the DEA number and the full name of the state to which it is associated displayed for each entry.

iii. Any of my expired DEA #s that expired within the last year should be displayed in the list along with the expiration date and state. However, the expired DEA # cannot be selected.

Example:

FY5589532 ALABAMA Expired: 02/21/2018

iv. If any of my DEA #s is not valid for the specific drug, I want them to be displayed along with the schedule of the drug, but these DEA #s cannot be selected.

Example:

FY5589532 ALABAMA Not Valid for Schedule: XX

Note: The schedule displayed along with the DEA # is the schedule of the drug being ordered v. I do not want a DEA # to be selected or displayed by default.

vi. Upon selecting a DEA # from the drop-down list, the DEA #, Address, City, State, and Zip Code will be displayed for confirmation with an “OK” and

“Cancel” button.

vii. If the drug contains buprenorphine and it is not an exempted dosage form, I want the Detox # to be displayed for confirmation. viii. Prescription ordering may proceed only with a confirmed DEA # (OK button selected).

c. If I only have one DEA #, it is valid for the Rx being entered and I have no expired DEA #s:

i. I want it to default to that DEA #.

ii. I want the DEA #, Address, City, State, and Zip Code to be displayed.

iii. If the drug contains buprenorphine and it is not an exempted dosage form, I want the Detox # to be displayed for confirmation. e. If any of my DEA #s is expired, I want to be prevented from selecting an expired DEA #.

i. If the only DEA # on file is expired, they have a VA #, and Failover is set to NO, I want to receive the following error message: “The provider’s DEA

# on file has Expired and must be updated.” “The provider’s DEA# on file has expired. Please verify the DEA registration and contact an EPCS GUI

administrator to update the expiration date.”

ii. If the only DEA # on file is expired, they do not have a VA #, and Failover is set to YES, I want to receive the following error message: “The provider’s DEA # on file has Expired and must be updated.” “The provider’s DEA# on file has expired. Please verify the DEA registration and contact an EPCS GUI administrator to update the expiration date.”

f. If the VA# is being used because there are no DEA #s (not even an expired one):

i. I want to default to use of the VA# as a suffix, with the institutional DEA# as a prefix.

ii. The identification of the facility/institutional DEA# to choose is defined based on the clinic location in file #44 (HOSPITAL LOCATION) which identifies a facility DEA#.

iii. I want to show the combination institutional DEA # prefix - individual VA # suffix and Address

2. If the correct DEA number is not available for selection, I want to be able to cancel the prescription entry process.

3. (New) API needs to support old (only returning 1 DEA number) and new (CPRS can select from multiple DEA numbers) version of CPRS.

4. I want the selected DEA# to be stored in File #101.52 during signing to match current functionality.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to be taken as actual values

**Provider(s) Scenarios:**

Provider 1: Valid DEA # (multiple) with a detox and institutional #. Provider 2: Valid DEA# and an Expired DEA # (within last year) Provider 3: DEA not valid for specific drug/schedule

Provider 4: DEA expired but valid VA #, and Failover is set to NO

Provider 5: All DEA # is expired but has a VA # and Failover is set to YES

Provider 6: VA # and no DEA #s on file (not even an expired one)

**Step 2**

**Execution Step**

Description\*

Scenario: When entering a controlled substance medication prescription, the user will be required to associate on of the provider’s DEA #s to the prescription.

Log into your local VistA instance

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

At the prompt type “Core Applications”

Expected Results

Core application options displays

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

At the prompt type “Outpatient Pharmacy Manager ...” Expected Results

The ‘Division:’ prompt displays..

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

When prompted for ‘Division,' select the division associated with your pharmacy system.

Expected Results

Division: 631 1 631 NORTHAMPTON 631

2 631A SPRINGFIELD 631A 3 631GE WORCESTER 631GE CHOOSE 1-3: 1 NORTHAMPTON 631

Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

When prompted to ‘Select Label printer,' press <enter> three times, at which you will see Outpatient Manger Menu

Expected Results

The user is taken to the next menu list for “Outpatient Pharmacy Manager” menu.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Select the “Rx (Prescriptions)…” option.

Expected Results

Select Outpatient Pharmacy Manager <TEST ACCOUNT> Option: RX (Prescriptions) Orders to be completed for all divisions: 620 Do you want an Order Summary? No// NO Patient Prescription Processing FERX Complete Orders from eRx Barcode Rx Menu ... Check Drug Interaction Complete Orders from OERR Discontinue Prescription(s) Edit Prescriptions ePharmacy Menu .

.. List One Patient's Archived Rx's Manual Print of Multi-Rx Forms OneVA Pharmacy Prescription Report Reprint an Outpatient Rx Label Signature Log Reprint View Prescriptions You have PENDING ALERTS Enter "VA to jump to VIEW ALERTS option Select Rx (Prescriptions) <TEST ACCOUNT> Option:

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Select “Patient Prescription Processing” option.

Expected Results

Select Rx (Prescriptions) <TEST ACCOUNT> Option: Patient Prescription Processing Select PATIENT NAME: Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

At the prompt for ‘Select PATIENT NAME:’, type Patient’s Name

Expected Results

The patient is selected, and the user is taken to the next prompt.

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

If prompted ‘Enter <RETURN> to continue.’, press <enter>

Expected Results

User is taken to the next prompt. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Press <enter> until you see the patient medication profile

Expected Results

Patient medication profile will be displayed with all prescriptions Medication Profile Aug 07, 2018@13:53:56 Page:1 of 1 LASTNAME, FIRSTNAME PID: ###-##-#### Ht(cm): DOB: MAY 18,1985 (33) Wt(kg): SEX: MALE CrCL: <Not Found>

(CREAT: Not Found) BSA (m2):

ISSUE LAST REF DAY # RX # DRUG QTY ST DATE FILL REM SUP ----------------------------ACTIVE------------------------------ 1 2340052$ SIMVASTATIN 5MG TAB 30 A> 07-31 07-31 11 30 Enter ?? for more actions PU Patient Record Update NO New Order PI Patient Information SO Select Order Select Action: Quit//

Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

At the prompt for action, type NO (new order) selected Action: Next Screen// NO New Order

Expected Results

User will be taken to the next prompt : Eligibility: SC LESS THAN 50% SC%: 10 RX PATIENT STATUS: SC LESS THAN 50%// DRUG: Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Press <enter> until the prompt for Drug is displayed and type a CS

Expected Results

Lookup: DRUG GENERIC NAME 1 CODEINE 10MG/GUAIFENESIN 100MG/5ML SYRUP RE301 2 CODEINE 30/ M

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ACETAMINOPHEN 300 | G TAB | CN101 3 CODEINE 60MG/ACETAMINOPHEN 300MG TAB | CN101 | 4 CODEINE |
| SULFATE 30MG TAB  Comments | CN101 | CHOOSE 1-4: 2 CODEINE 30/ACETAMINOPHEN 300MG TAB | CN101 |  |

Validates

Attachments

**Step 14**

**Execution Step**

Description\* Press <enter>

Expected Results

No Enhanced Order Checks can be performed. Reason(s): The connection to the vendor database has been disabled. Press Return to continue...:

Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\* Press <enter>

Expected Results

--------------------------------------------------------------------------- Rx: 2340097 Drug: CODEINE 30/ACETAMINOPHEN 300MG TAB SIG: TAKE 1 TABLET NOW THEN TAKE 2 TABLETS NOW FOR 2 DAYS FOR PAIN QTY:

1 Refills remaining: 3 Provider: LASTNAME, FIRSTNAME Issued: 10/05/18 Status: Active

Last filled: 10/05/18 Processing Status: Not released locally (Window) Days Supply: 30 ------------------------------

--------------------------------------------- RX # 2340097 CODEINE 30/ACETAMINOPHEN 300MG TAB Y/N? yes YES Now doing allergy checks. Please wait... Now processing Clinical Reminder Order Checks. Please wait ... There are 2 Available Dosage(s): 1. 1 TABLET 2. 2 TABLETS Select from the list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list:

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

At the prompt for ‘Please Enter a Free Text Dose:’, type 1

Expected Results

‘You entered 1 TABLET is this correct? Yes//’ Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Press <Enter> to continue

Expected Results

VERB: TAKE ROUTE: // Schedule: Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Enter schedule and press

Expected Results

The ‘LIMITED DURATION (IN DAYS, HOURS OR MINUTES):’is displayed. Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Press Enter until the ‘Provider’ prompt is displayed.

Expected Results

CONJUNCTION: Dosing Checks could not be performed. Reason(s): The connection to the vendor database has been disabled. PATIENT INSTRUCTIONS: for pain// for pain FOR PAIN (TAKE ONE TABLET EVERY 12 HOURS FOR PAIN) DAYS SUPPLY: (1-30): 30// QTY ( TAB ) : 60/

/ 30 Greater Than Current Inventory! Below Reorder Level. COPIES: 1// 1 No refills allowed on Narcotics. PROVIDER: Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Select Provider 1: Valid DEA # (multiple) with Detox and Institutional #. Verify the message is displayed upon entering a provider who has multiple valid DEA #s: “This provider has multiple DEA registrations. Please select the correct DEA number for the prescription being entered:”

Expected Results

This provider has multiple DEA registrations. Please select the correct DEA number for the prescription being entered

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Verify the valid DEA #s is displayed along with identifier with the full name of the state which are associated and the user has the option to choose.

1. XXNNNNNNN TEXAS 2. XXNNNNNNN ILLINOIS Choose: (1-2):

Expected Results

1. XXNNNNNNN TEXAS 2. XXNNNNNNN ILLINOIS Choose: (1-2): Note: None of the default DEA # is selected. Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Verify the DEA information is displayed upon selecting the desired DEA #.

Expected Results

PROVIDER: YESS, DOCTOR MD TW – NON-VA PROVIDER This provider has multiple DEA registrations. Please select the correct DEA number for the prescription being entered 1 FY5589532 ALABAMA 2 FY1234819 ILLINOIS Choose 1-2: 2 Provider’s DEA Information: FY1234819 1228 N STATE STREET CHICAGO, IL 60699

[and then it proceeds to the next prompt] Note: If the provider has an expired DEA # with a valid DEA, then all DEA #s will be displayed. Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Select Provider 2: Expired DEA # (within last year) valid Verify the expired DEA # is displayed in the list along with the expiration date and state.

Expected Results

e.g. \* FY5589532 ALABAMA Expired: 02/21/2018

Comments

Validates

Attachments

**Step 24**

**Execution Step**

Description\*

Select Provider 3: DEA not valid for specific drug/schedule Verify DEA #s is not valid for specific drug/schedule (e.g. provider has schedule 3 (codeine) and prescribing schedule 4 (Diazepam).

Expected Results

The DEA #s will be displayed along with the schedule of the drug, but cannot be selected. Note: (e.g. \* FY5589532 ALABAMA Not Valid for

Schedule: XX) Comments

Validates

Attachments

**Step 25**

**Execution Step**

Description\*

Select Provider 4: Only DEA # on file is expired, has a valid VA #, and Failover is set to NO Verify the following error message is displayed: “The provider’s DEA # on file has Expired and must be updated.” Note: Set Failover using the “PSO EPCS EXPIRED DEA FAILOVER” based on the site parameter and privileges.

Expected Results

The following error message is displayed: “The provider’s DEA # on file has Expired and must be updated.” Comments

Validates

Attachments

**Step 26**

**Execution Step**

Description\*

Verify the following error message is displayed when the only DEA # on file is expired, has no VA #, and Failover is set to Yes: “The provider’s DEA #

on file has Expired and must be updated.”

Expected Results

The following error message is displayed: “The provider’s DEA # on file has Expired and must be updated.” Comments

Validates

Attachments

**Step 27**

**Execution Step**

Description\*

Select Provider 5: All DEA # is expired but has a VA # and Failover is set to YES Verify the VA # is displayed upon the expired DEA #(s). Note: Set

Failover using the “PSO EPCS EXPIRED DEA FAILOVER” based on the site parameter and privileges.

Expected Results

The VA # will be displayed above the expired DEA #(s). e.g. PROVIDER: YESS, DOCTOR MD TW – NON-VA PROVIDER This provider has multiple DEA registrations. Please select the correct DEA number for the prescription being entered 1 332AG323 (VA#) \* FY5589532

ALABAMA Expired: 02/21/2018 Choose 1: 1

Comments

Validates

Attachments

**Step 28**

**Execution Step**

Description\*

Verify that user is unable to select the expired DEA # by entering (e.g. \* FY5589532 ALABAMA Expired: 02/21/2018)

Expected Results

The user will be unable to select the expired DEA #. Comments

Validates

Attachments

**Step 29**

**Execution Step**

Description\*

Attempt to select the VA #

Expected Results

The user will be able to select the VA # Comments

Validates

Attachments

**Step 30**

**Execution Step**

Description\*

Select Provider 6: VA # and no DEA #s on file (not even an expired one) Verify the VA # as a suffix with the institutional DEA# as a prefix will be in use by default.

Expected Results

PROVIDER: RESIDENT, NEWBIE MD PGY1 INTERN HOUSE STAFF Provider’s DEA Information: AV5589532-S9876 5000 S. 5TH AVENUE HINES, IL 60141 [and then it proceeds to the next prompt]

Comments

Validates

Attachments

**Step 31**

**Execution Step**

Description\*

Verify when the right DEA # is not found, the user will be able to cancel the prescription entry process by entering a caret ‘^’ at the ‘Choose 1-x’

prompt.

Expected Results

The user will be allowed to exit, and the system will return to the PROVIDER prompt.

Comments

Validates

Attachments

**Step 32**

**Execution Step**

Description\*

This is the b test script:

**Scenario:** When displaying the provider details for the selected DEA # when the drug contains buprenorphine, include the Detox #.

Log into your local VistA instance

Expected Results

User will be taken to the access/verify code prompts. Comments

Validates

Attachments

**Step 33**

**Execution Step**

Description\*

Navigate to the Patient Prescription Processing option.

Expected Results

User will be prompted with the Division. Comments

Validates

Attachments

**Step 34**

**Execution Step**

Description\*

When prompted for ‘Division’, select the division associated with your pharmacy system.

Expected Results

Division: 631 NORTHAMPTON Comments

Validates

Attachments

**Step 35**

**Execution Step**

Description\*

When prompted with ‘Select LABEL PRINTER’, press <enter>

Expected Results

User is taken to the next prompt. Comments

Validates

Attachments

**Step 36**

**Execution Step**

Description\*

If prompted “OK to assume label alignment is correct? YES//” , press <enter>

Expected Results

User is taken to the next prompt

Comments

Validates

Attachments

**Step 37**

**Execution Step**

Description\*

When prompted ‘Bingo Board Display:”, press <enter>

Expected Results

User is taken to the next menu list for outpatient pharmacy. Comments

Validates

Attachments

**Step 38**

**Execution Step**

Description\*

At the prompt for ‘Select PATIENT NAME:’, type Patient’s Name

Expected Results

Patient is selected and user is taken to the next prompt. Comments

Validates

Attachments

**Step 39**

**Execution Step**

Description\*

If prompted ‘Enter <RETURN> to continue.’, press <enter>

Expected Results

User is taken to the next prompt. Comments

Validates

Attachments

**Step 40**

**Execution Step**

Description\*

Press <enter> until you see the patient medication profile

Expected Results

Patient medication profile will be displayed with all prescriptions Medication Profile Aug 07, 2018@13:53:56 Page:1 of 1 LASTNAME, FIRSTNAME PID: ###-##-#### Ht(cm): DOB: MAY 18,1985 (33) Wt(kg): SEX: MALE CrCL: <Not Found>

(CREAT: Not Found) BSA (m2): ISSUE LAST REF DAY # RX #

DRUG QTY ST DATE FILL REM SUP ----------------------------ACTIVE------------------------------ 1 2340052$ SIMVASTATIN 5MG TAB 30

A> 07-31 07-31 11 30 Enter ?? for more actions PU Patient Record Update NO New Order PI Patient

Information SO Select Order Select Action: Quit// Comments

Validates

Attachments

**Step 41**

**Execution Step**

Description\*

At the prompt for action, type NO (new order) selected Action: Next Screen// NO New Order

Expected Results

User will be taken to the next prompt : Eligibility: SC LESS THAN 50% SC%: 10 RX PATIENT STATUS: SC LESS THAN 50%// DRUG:

Comments

Validates

Attachments

**Step 42**

**Execution Step**

Description\*

Press <enter> until the prompt for Drug is displayed and type a CS (buprenorphine-schedule 3)

Expected Results

Lookup: DRUG GENERIC NAME 1 BUPRENORPHINE 2MG/NALOXONE 0.5MG SL TAB CN101 RESTRIC TED TO AUTHORIZED PROVIDERS 2 BUPRENORPHINE 8MG/NALOXONE 2MG SL TAB CN101 3 BUPRENORPHINE HCL 2MG SUBLINGUAL TAB CN101 4 BUPRENORPHINE HCL 8MG SUBLINGUAL TAB CN101 CHOOSE 1-4:4

Comments

Validates

Attachments

**Step 43**

**Execution Step**

Description\* Press <enter>

Expected Results

No Enhanced Order Checks can be performed. Reason(s): The connection to the vendor database has been disabled. Press Return to continue...: Comments

Validates

Attachments

**Step 44**

**Execution Step**

Description\* Press <enter>

Expected Results

--------------------------------------------------------------------------- Rx: 2340097 Drug: CODEINE 30/ACETAMINOPHEN 300MG TAB SIG: TAKE 1 TABLET NOW THEN TAKE 2 TABLETS NOW FOR 2 DAYS FOR PAIN QTY:

1 Refills remaining: 2

Provider: LASTNAME, FIRSTNAME Issued: 10/05/18 Status: Active Last filled: 10/05/18

Processing Status: Not released locally (Window) Days Supply: 30 ----------------------------------------------------------------

----------- Now doing allergy checks. Please wait... Now processing Clinical Reminder Order Checks. Please wait ... There are 2 Available Dosage(s):

1. 1 TABLET 2. 2 TABLETS Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: Comments

Validates

Attachments

**Step 45**

**Execution Step**

Description\*

At the prompt for ‘Please Enter a Free Text Dose:’, type 1

Expected Results

‘You entered 1 TABLET is this correct? Comments

Validates

Attachments

**Step 46**

**Execution Step**

Description\*

Press <Enter> to continue

Expected Results

VERB: TAKE ROUTE: // Schedule: Comments

Validates

Attachments

**Step 47**

**Execution Step**

Description\*

Enter schedule and press

Expected Results

The ‘LIMITED DURATION (IN DAYS, HOURS OR MINUTES):’is displayed. Comments

Validates

Attachments

**Step 48**

**Execution Step**

Description\*

Press Enter until the ‘Provider’ prompt is displayed.

Expected Results

CONJUNCTION: Dosing Checks could not be performed. Reason(s): The connection to the vendor database has been disabled. PATIENT INSTRUCTIONS: for pain// for pain FOR PAIN (TAKE ONE TABLET EVERY 12 HOURS FOR PAIN) DAYS SUPPLY: (1-30): 30// QTY ( TAB ) : 60/

/ 30 Greater Than Current Inventory! Below Reorder Level. COPIES: 1// 1 No refills allowed on Narcotics. PROVIDER:

Comments

Validates

Attachments

**Step 49**

**Execution Step**

Description\*

At the ‘PROVIDER’ prompt, type a provider who has multiple valid DEA #s and select the desired DEA #.

Expected Results

This provider has multiple DEA registrations. Please select the correct DEA number for the prescription being entered 1. XXNNNNNNN TEXAS 2. XXNNNNNNN ILLINOIS Choose: (1-2):

Comments

Validates

Attachments

**Step 50**

**Execution Step**

Description\*

Scenario 2: When there is only one DEA #, it is valid for the Rx being entered, the provider has no expired DEA #s, and the drug contains buprenorphine (Schedule 3) and is not an exempted dosage form. Note:

e.g. CHOOSE 1-5: 3 PSS BUPRENORPHINE DOSAGE FORMS Manage Buprenorphine Tx of Pain Dosage Forms Manage Buprenorphine Tx of Pain Dosage Forms Dosage Forms Buprenorphine Tx of Pain may be set for the following: 5 System SYS [NHML28.FO-BAYPINES. MED.VA.GOV] 10 Package PKG [PHARMACY DATA MANAGEMENT]

Verify the provider’s details contains the Detox # for the selected DEA # when the drug contains buprenorphine.

Expected Results

The DEA # will be displayed by default as below. e.g. PROVIDER: YESS, DOCTOR MD TW – NON-VA PROVIDER Provider’s DEA Information: FY5589532 Detox/Maintenance: XY5589532 LIMITED TO FEDERAL USE ONLY 345 E. MAIN STREET TOWNE, AL 55201 [and then it proceeds to the next prompt] CLINIC: Select one of the following: M MAIL W WINDOW

Comments

Validates

Attachments

**Step 51**

**Execution Step**

Description\*

Navigate back to Provider prompt and select a provider who has VA # and no DEA #s on file.

Expected Results

The VA # as a suffix with the institutional DEA# as a prefix will be in use by default. e.g. PROVIDER: RESIDENT, NEWBIE MD PGY1 INTERN HOUSE STAFF Provider’s DEA Information: AV5589532-S9876 5000 S. 5TH AVENUE HINES, IL 60141 [and then it proceeds to the next prompt]

Comments

Validates

Attachments

**Step 52**

**Execution Step**

Description\*

Enter ‘^’ at the ‘Choose 1-x’ prompt.

Expected Results

The user will be able to cancel the prescription entry process by entering a caret (^) at the “Choose 1-x” prompt. Comments

Validates

Attachments

**Step 53**

**Execution Step**

Description\*

At the ‘PROVIDER’ prompt, select a provider with a valid DEA # to confirm the following scenarios by changing the expiration date for the DEA #. a. Existing Rx entered, then provider DEA # expires, then COPY Rx b. Existing Rx entered, then provider DEA # expires, then RENEW Rx Existing Rx entered, then provider DEA # expires, then RENEW Rx and edit provider

Expected Results

The user will be able to confirm the scenarios. Comments

Validates

Attachments

**Step 54**

**Execution Step**

Description\*

Exit out of Backdoor pharmacy and navigate to FileMan and verify the selected DEA # is stored in File 101.52.

Expected Results

The selected DEA# will be stored in File #101.52 to match current functionality.

Comments

Validates

Attachments

**Step 55**

**Execution Step**

Description\*

Exit out and navigate back to ‘Patient Prescription Processing’ option.

Expected Results

The selected DEA# will be stored in File #101.52 to match current functionality. Comments

Validates

Attachments

**Step 56**

**Execution Step**

Description\*

Exit out and navigate back to ‘Patient Prescription Processing’ option.

Expected Results

User will be prompted with the Division. Comments

Validates

Attachments

**Step 57**

**Execution Step**

Description\*

When prompted for ‘Division’, select the division associated with your pharmacy system.

Expected Results

Division: 631 NORTHAMPTON Comments

Validates

Attachments

**Step 58**

**Execution Step**

Description\*

When prompted with ‘Select LABEL PRINTER’, press <enter>

Expected Results

User is taken to the next prompt. Comments

Validates

Attachments

**Step 59**

**Execution Step**

Description\*

If prompted “OK to assume label alignment is correct? YES//” , press <enter>

Expected Results

User is taken to the next prompt

Comments

Validates

Attachments

**Step 60**

**Execution Step**

Description\*

When prompted ‘Bingo Board Display:”, press <enter>

Expected Results

User is taken to the next menu list for outpatient pharmacy. Comments

Validates

Attachments

**Step 61**

**Execution Step**

Description\*

At the prompt for ‘Select PATIENT NAME:’, type Patient’s Name

Expected Results

Patient is selected and user is taken to the next prompt. Comments

Validates

Attachments

**Step 62**

**Execution Step**

Description\*

If prompted ‘Enter <RETURN> to continue.’, press <enter>

Expected Results

User is taken to the next prompt. Comments

Validates

Attachments

**Step 63**

**Execution Step**

Description\*

Press <enter> until you see the patient medication profile

Expected Results

Patient medication profile will be displayed with all prescriptions Medication Profile Aug 07, 2018@13:53:56 Page:1 of 1 LASTNAME, FIRSTNAME PID: ###-##-#### Ht(cm): DOB: MAY 18,1985 (33) Wt(kg): SEX: MALE CrCL: <Not Found>

(CREAT: Not Found) BSA (m2): ISSUE LAST REF DAY # RX #

DRUG QTY ST DATE FILL REM SUP ----------------------------ACTIVE------------------------------ 1 2340052$ SIMVASTATIN 5MG TAB 30

A> 07-31 07-31 11 30 Enter ?? for more actions PU Patient Record Update NO New Order PI Patient

Information SO Select Order Select Action: Quit// Comments

Validates

Attachments

**Step 64**

**Execution Step**

Description\*

At the prompt for action, type NO (new order) selected Action: Next Screen// NO New Order

Expected Results

User will be taken to the next prompt : Eligibility: SC LESS THAN 50% SC%: 10 RX PATIENT STATUS: SC LESS THAN 50%// DRUG: Comments

Validates

Attachments

**Step 65**

**Execution Step**

Description\*

Press <enter> until the prompt for Drug is displayed and type a CS (buprenorphine-schedule 3)

Expected Results

Lookup: DRUG GENERIC NAME 1 BUPRENORPHINE 2MG/NALOXONE 0.5MG SL TAB CN101 RESTRIC TED TO AUTHORIZED PROVIDERS

2 BUPRENORPHINE 8MG/NALOXONE 2MG SL TAB CN101 3 BUPRENORPHINE HCL 2MG SUBLINGUAL TAB CN101 4 BUPRENORPHINE HCL 8MG SUBLINGUAL TAB CN101 CHOOSE 1-4:4

Comments

Validates

Attachments

**Step 66**

**Execution Step**

Description\* Press <enter>

Expected Results

No Enhanced Order Checks can be performed. Reason(s): The connection to the vendor database has been disabled. Press Return to continue...: Comments

Validates

Attachments

**Step 67**

**Execution Step**

Description\* Press <enter>

Expected Results

|  |  |  |
| --- | --- | --- |
| Rx: 2340097 | Drug: CODEINE 30/ACETAMINOPHEN 300MG TAB | SIG: TAKE 1 TABLET NOW THEN TAKE |
| 2 TABLETS NOW FOR 2 DAYS | FOR PAIN QTY: 1 | Refills remaining: 2 Provider: LASTNAME, |

FIRSTNAME Issued: 10/05/18 Status: Active Last filled: 10/05/18 Processing Status: Not released locally

(Window) Days Supply: 30 --------------------------------------------------------------------------- Now doing allergy checks. Please wait... Now processing Clinical Reminder Order Checks. Please wait ... There are 2 Available Dosage(s): 1. 1 TABLET 2. 2

TABLETS Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: Comments

Validates

Attachments

**Step 68**

**Execution Step**

Description\*

At the prompt for ‘Please Enter a Free Text Dose:’, type 1

Expected Results

‘You entered 1 TABLET is this correct? Yes//’ Comments

Validates

Attachments

**Step 69**

**Execution Step**

Description\*

Press <Enter> to continue

Expected Results

VERB: TAKE ROUTE: // Schedule: Comments

Validates

Attachments

**Step 70**

**Execution Step**

Description\*

Enter schedule and press

Expected Results

The ‘LIMITED DURATION (IN DAYS, HOURS OR MINUTES):’is displayed.

Comments

Validates

Attachments

**Step 71**

**Execution Step**

Description\*

Press Enter until the ‘Provider’ prompt is displayed.

Expected Results

CONJUNCTION: Dosing Checks could not be performed. Reason(s): The connection to the vendor database has been disabled. PATIENT INSTRUCTIONS: for pain// for pain FOR PAIN (TAKE ONE TABLET EVERY 12 HOURS FOR PAIN) DAYS SUPPLY: (1-30): 30//

QTY ( TAB ) : 60// 30 Greater Than Current Inventory! Below Reorder Level. COPIES: 1// 1 No refills allowed on Narcotics. PROVIDER: Comments

Validates

Attachments

**Step 72**

**Execution Step**

Description\*

At the ‘PROVIDER’ prompt, type a provider who has multiple valid DEA #s and select the desired DEA #.

Expected Results

This provider has multiple DEA registrations. Please select the correct DEA number for the prescription being entered 1. XXNNNNNNN TEXAS 2. XXNNNNNNN ILLINOIS Choose: (1-2):

Comments

Validates

Attachments

**Step 73**

**Execution Step**

Description\*

Select the DEA for the prescription being entered

Expected Results

Choose: (1-1): 1 DEA NUMBER: XXNNNNNNN STREET ADDRESS 1: 7300 MAIN STREET STREET ADDRESS 2: ADDRESS STREET7322

STREET ADDRESS 3: ARRDESS STREET7323 CITY: PLANO STATE: TEXAS ZIP CODE: 75025 CLINIC: Comments

Validates

Attachments

**Step 74**

**Execution Step**

Description\*

Complete the rest of the prompts to see the ‘Medication Profile’

Expected Results

Medication Profile Dec 28, 2018@00:40:27 Page: 2 of 4 LASTNAME, FIRSTNAME PID: ###-##-####

Ht(cm): ( ) DOB: MAR 12,1949 (69) Wt(kg): ( ) SEX: MALE CrCL:

<Not Found> (CREAT: 0.75mg/dL 1/26/12) BSA (m2):

ISSUE LAST REF DAY # RX #

DRUG QTY ST DATE FILL REM SUP + 9 2340135 CODEINE 10MG/ GUAIFENESIN 100MG/5ML SYRUP A 11-07 11-07 3 30 Qty: 0.05 10 2340097 CODEINE 30/ ACETAMINOPHEN 300MG TAB 1 A> 10-05 10-05 2 30 11 2340107 CODEINE 60MG/ACETAMINOPHEN 300MG TAB 1 A> 10-10 10-10

2 20 12 2340165 CODEINE SULFATE 30MG TAB 30 A 12-28 12-28 0 30 13 2340113 DEXMETHYLPHENIDATE HCL 10MG SA CAP 1 E 10-24 10-24 0 30 14 2340106t DIGOXIN 0.25MG TAB 1 A> 10-09 10-09 2 90 15 2340102 FENTANYL 12MCG/ HR PATCH 1 E 10-05 10-05 0 30 16 2340100 LORAZEPAM 1MG TAB 10 A> 10-05 10-05 5 30 17 2340112

METHADONE 5MG TAB 1 E 10-24 10-24 0 30 + No refills allowed on Narcotics. Comments

Validates

Attachments

**Step 75**

**Execution Step**

Description\*

Select the entered CS order and verify the “DEA#:” label is displaying the DEA# associated with a controlled substance prescription.

Expected Results

OP Medications (ACTIVE) Dec 28, 2018@00:40:40 Page: 2 of 3

LASTNAME, FIRSTNAME PID: ###-##-#### Ht(cm): ( ) DOB: MAR 12,1949 (69)

Wt(kg): ( ) SEX: MALE CrCL: <Not Found> (CREAT: 0.75mg/dL 1/26/12) BSA (m2):

+ (6) Issue Date: 12/28/18 (7) Fill Date: 12/28/18 Last Fill Date: 12/28/

18 (Window) Last Release Date: (8) Lot #: Expires: 01/27/19

MFG: (9) Days Supply: 30 (10) QTY (TAB): 30 (11) # of Refills: 0 Remaining: 0 (12) Provider: LASTNAME, FIRSTNAME DEA#: XXNNNNNNN

(13) Routing: WINDOW (14) Copies: 1 (15) Clinic: Not on File (16)

Division: NORTHAMPTON (631) (17) Pharmacist: + Enter ?? for more actions DC Discontinue PR Partial RL Release ED Edit RF (Refill) RN (Renew) Select Action: Next Screen//

Comments

Validates

Attachments

**Step 76**

**Execution Step**

Description\*

Select provider(s) with the following and verify the “DEA#:” label is displaying: a. when a provider’s DOJ issued individual DEA# is used for the prescription. b. when a Facility DEA# - VA# is used for the prescription. c. when an institutional DEA# - Unique Suffix is used for the prescription.

Expected Results

The “DEA#:” label will be displayed for the following provider(s): a. when a provider’s DOJ issued individual DEA# is used for the prescription. b. when a Facility DEA# - VA# is used for the prescription. c. when an institutional DEA# - Unique Suffix is used for the prescription.

End of test

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216250: CAS\_MPDU\_TS\_1.3.5.01 | Site Level Parameter for “Fail Over”**



**functionality**

Creation Date: Feb 7, 2019 7:44:52 PM (UTC-06:00) Last Modified: Feb 7, 2019 7:52:55 PM (UTC-06:00) State: Under Review

Originator: Gupta, Poonam (AbleVets) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.3.5.01 | Site Level Parameter for “Fail Over” functionality

Description: Navigate to the PSO EPCS EXPIRED DEA FAILOVER parameter, ability to edit and verify the parameter attributes. Scenario 1: Set the Inpatient Patient Orders flag.

Scenario 2: Receive an error message when a controlled substance with a schedule that is not authorized for the provider to prescribe for the DEA # is selected.

Scenario 3: Does not receive an error message when a controlled substance with a schedule that is authorized for the provider to prescribe for the DEA

# is selected.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to be taken as actual values

**Step 2**

**Execution Step**

Description\*

Log in to VistA as a pharmacy manager.

Expected Results

The primary menu is displayed. Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Navigate to “ePCS UTILITY FUNCTIONS” menu.

Expected Results

Select Systems Manager Menu <TEST ACCOUNT> Option: epcs DEA Utility Functions

1 DEA Expiration Date Report

2 Print Prescribers with Privileges

3 Print DISUSER Prescribers with Privileges

4 Print PSDRPH Key Holders

5 Print Setting Parameters Privileges

6 Print Audits for Prescriber Editing

7 Changes to DEA Prescribing Privileges Report

8 Allocation Audit of PSDRPH Key Report

9 Enter/Edit EPCS Access Reports Parameters

10 Allow VA Number if DEA Number Expired

11 Set Pharmacy Operating Mode

12 Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

From primary menu, navigate to “GENERAL PARAMETER TOOLS [XPAR MENU TOOLS]” option.

Expected Results

Select General Parameter Tools <TEST ACCOUNT> Option: EP Edit Parameter Values

--- Edit Parameter Values --- Select PARAMETER DEFINITION NAME:

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Type “PSOEPCS EXPIRED DEA FAILOVER” and press enter.

Expected Results

Select PARAMETER DEFINITION NAME: PSOEPCS EXPIRED DEA FAILOVER Allow VA Number if DEA Number Expired

Setting PSOEPCS EXPIRED DEA FAILOVER for System: NHML28.FO-BAYPINES.MED.VA.GOV

Value: YES// Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Verify when the user enters Allow VA Number if DEA Number Expired [PSO EPCS EXPIRED DEA FAILOVER]and presses Enter.

Expected Results

The “Value:YES//” prompt is displayed.

1) It is verified that the parameter is available at the location XPAR MENU TOOLS

2) It is verified the parameters internal name is PSOEPCS EXPIRED DEA FAILOVER.

3) It is verified that by default this parameter is already set to YES.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Verify that the following help text is displayed upon entering “?”.

Expected Results

Verify that the following help text is displayed.

“YES = allow provider with expired DEA# to order CS with a VA#” Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Verify that the following help text is displayed upon entering “??”.

Expected Results

“Entering a value of YES will allow a provider with an expired DEA number to be able to prescribe controlled substances based on their VA number. Entering a value of NO will not allow a provider with an expired DEA number

to be able to prescribe controlled substances. A provider without a DEA number will

still be able to prescribe controlled substances if they have a VA number entered in VistA.” Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Verify that the following warning message is displayed when NO is entered for the parameter value.

Expected Results

“\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*WARNING \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

A value of NO prevents providers with an expired DEA number from prescribing controlled substances. A provider without a DEA number will still be able to prescribe controlled substances if they have a VA number entered in VistA.”

Also verify that the parameter is set to NO. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Navigate back to the “PSOEPCS EXPIRED DEA FAILOVER” parameter and change the value to “YES” and verify the parameter is set to YES

Expected Results

The parameter is set to YES. End of Test.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216251: CAS\_MPDU\_TS\_1.2.1.05 | Create Report Delivery Parameters**



Creation Date: Feb 7, 2019 7:58:02 PM (UTC-06:00) Last Modified: Feb 7, 2019 8:03:40 PM (UTC-06:00) State: Under Review

Originator: Gupta, Poonam (AbleVets) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.2.1.05 | Create Report Delivery Parameters

Description: User will be able to configure the delivery location(s) of the PSO EPCS LOGICAL ACCESS REPORT and PSO EPCS PHARMACIST ACC REPORT.

1. Define the printer and the email address for the delivery of the “PSO EPCS LOGICAL ACCESS REPORT and verify the parameters are named

“PSOEPCS LOGICAL ACC REPORT DEV” and “PSOEPCS LOGICAL ACC REPORT EMAIL”

2. Define the printer and the email address for the “PSO EPCS PHARMACIST ACC REPORT” and verify the parameters are named “PSOEPCS PHARM ACC RPT DEVICE” and “PSOEPCS PHARM ACC REPORT EMAIL”.

3. User will have the ability to access these parameters from a new option on the PSO EPCS Utility Functions menu.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

All data is for demonstration purposes only and not to taken as actual values

**Step 2**

**Execution Step**

Description\*

Log in to your VistA instance using user credentials.

Expected Results

The primary VistA menu is displayed. Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Navigate to EPCS DEA UTILITY FUNCTIONS menu.

Expected Results

Enter/Edit EPCS Access Reports Parameters is displayed as a menu item. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Select Enter/Edit EPCS Access Reports Parameters and verify

Expected Results

1 PSOEPCS LOGICAL ACC REPORT DEV

2 PSOEPCS LOGICAL ACC RPT EMAIL

3 PSOEPCS PHARM ACC RPT DEVICE

4 PSOEPCS PHARM ACC REPORT EMAIL Select parameter to edit:

Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Select from the list to configure the delivery location(s) of PSO EPCS LOGICAL

ACCESS Report (DEV/EMAIL) and PSO EPCS PHARMACIST ACC REPORT (DEV/EMAIL) Expected Results

The prompt “ Select Logical Access Report Email Group:” will be displayed. Select one of the following:

Note:

The prompt(s) will be displayed based on the selection of the parameters (DEV/EMAIL). Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Enter a valid Email group.

Expected Results

Note:

Unable to validate Device configuration as no physical device is available onsite for testing. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Unable to validate Device configuration as no physical device is available onsite for testing.

Expected Results

The parameter will be set and the report will be delivered to the appropriate device/individuals. End of Test.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216253: CAS\_MPDU \_TS\_5.0.01\_PIV Card Certificate Expiration Alert**



Creation Date: Feb 7, 2019 8:17:33 PM (UTC-06:00) Last Modified: Feb 7, 2019 8:18:39 PM (UTC-06:00) State: Draft

Originator: Gupta, Poonam (AbleVets) Owner: Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU \_TS\_5.0.01\_PIV Card Certificate Expiration Alert

Description:

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

This is tested by code review

1.I want the notification that currently states, “DEA Certificate Expired” to state “Rx processed: PIV Card Cert Expired - NO ACTION REQ” when a pharmacist tries to finish a controlled substance prescription in outpatient pharmacy that was placed by a provider whose PIV card (PKI certificate) expired after the order was submitted in CPRS but before the pharmacy processed the order.

2.I want the alert in CPRS that is received by a provider when a controlled substance prescription that they digitally signed is processed (finished) by pharmacy AFTER the PIV certificate used to sign it has expired to be changed from “DEA Certificate Expired. Renew your certification.” to state, “Rx processed: PIV Card Cert Expired - NO ACTION REQ”.

3.I want the notification logged in file 100.9 by CPRS changed from “DEA Certificate Expired” to state, “PIV Certificate Expired”.

**Notes:**

**Step 2**

**Execution Step**

Description\*

• Scenario description

• Outpatient prescription is entered and digitally signed by a provider using a valid PIV card

• PIV card then expires

• Pharmacy attempts to process the prescription and the current message “DEA Certificate Expired” is displayed

• The pharmacist is warned during finishing if the signature came from a now-expired PIV card certificate (the prescription is still valid).

• History

• In the early pilots of EPCS (meaning around 2002, yes, >15 years ago), there were DEA-issued certificates on the smart cards, so the wording was right.

• When EPCS was nationally released (2012/2013), the system had switched to use of PIV cards, and there are no DEA certificates in play anymore.

• This story is not designed to change any processes, just the wording of the message

• OR patch for CPRS

• CPRS file entry to be modified:

• ^ORD(100.9,"B","DEA CERTIFICATE EXPIRED",76)=""

• In PSOPKIV1 (VistA), this is the error codes:

• 20 ;;Certificate expired;;

• In PSOPKIV1, there are 2 other places that have text “DEA Certificate”, which needs to be phrased as “PIV Certificate”.

Expected Results

Review by code

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216254: CAS\_MPDU\_TS\_5.0.02- PIV Card Certificate Revoked Alert**



Creation Date: Feb 7, 2019 8:22:12 PM (UTC-06:00) Last Modified: Feb 7, 2019 8:23:54 PM (UTC-06:00) State: Draft

Originator: Gupta, Poonam (AbleVets) Owner: Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_5.0.02- PIV Card Certificate Revoked Alert

Description: 1. I want the notification that currently states, “DEA Certificate Revoked” to state, “Rx NOT processed: PIV Card Certificate Revoked” when a pharmacist tries to finish a controlled substance prescription in outpatient pharmacy that was placed by a provider whose PIV card (PKI certificate) was revoked after the order was submitted in CPRS but before the pharmacy processed the order.

2. I want the alert in CPRS that is received by a provider when a controlled substance prescription that they digitally signed is processed (finished) by pharmacy AFTER the PIV certificate used to sign it has been revoked to be changed from “Med orders(s) DCed. Cert revoked. Contact Pharm.” to state, “Rx NOT processed: PIV Card Certificate Revoked”.

3. I want the notification logged in file 100.9 by CPRS changed from “DEA Certificate Revoked” to state, “PIV Certificate Revoked”. (Note: Acceptance Criteria #2 and #3 may end up being the same.)

4. I want the email message that is sent when a pharmacist tries to finish a controlled substance prescription that was placed by a provider whose PIV

card (PKI certificate) was revoked after the order was submitted in CPRS but before the pharmacy processed the order to be updated.

a. I want the email message that currently states, “Following order was auto discontinued when finishing a pending order due to Certificate revoked” to be changed to “Following order was auto discontinued when finishing a pending order due to PIV certificate revoked.”

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

PIV Card Certificate Revoked Alert

This was tested by code review

**Step 2**

**Execution Step**

Description\*

Tested by code review

Expected Results

Tested by code review

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216255: CAS\_MPDU\_TS\_1.2.1.03\_Modify the Changes to DEA Prescribing Privileges Report PSO EPCS LOGICAL ACCESS(A)**



Creation Date: Feb 7, 2019 8:52:53 PM (UTC-06:00) Last Modified: Feb 8, 2019 6:28:23 AM (UTC-06:00) State: Draft

Originator: Gupta, Poonam (AbleVets) Owner: Gupta, Poonam (AbleVets)

Type: Manual

Test Data: Unassigned

Copied To:CAS\_MPDU\_TS\_1.2.1.03\_Modify the Changes to DEA Prescribing Privileges Report PSO EPCS LOGICAL ACCESS(B), Copy of

CAS\_MPDU\_TS\_1.2.1.03\_Modify the Changes to DEA Prescribing Privileges Report PSO EPCS LOGICAL ACCESS(A)

Description: The following test case will verify the modifications made to DEA PRESCRIBING PRIVILEGES Report.

• I want the ability to run the report on demand.

• When I run the report on demand, I want the ability to print the report.

• I want the ability to email the report when run on demand.

• I want the report to be deliverable to device, email, or both.

• When manually running the report, I want to be prompted for a date range.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

The report output separated by division.

Fileman access to 8991.9 for site to be requested.

The Pharmacy Manager should have a mail group available in which he is a member to set and receive the Changes to DEA PRESCRIBING PRIVILEGES Report.

The providers with multiple divisions (as defined in file 200 or 8991.9) to appear in the report section for each of their divisions.

· The report will include schedule data stored in file #200 which is related to the provider’s VA#.

**Note:** Setup data using “Allocation of Security Keys/De-allocation of Security Keys” options from “Key Management” menu.

**Step 2**

**Execution Step**

Description\*

Log into VistA instance using user credentials.

Expected Results s

The primary menu is displayed. Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Navigate to “ePCS DEA UTILITY FUNCTIONS” menu.

Expected Results

Select Systems Manager Menu <TEST ACCOUNT> Option: epcs DEA Utility Functions

1 DEA Expiration Date Report

2 Print Prescribers with Privileges

3 Print DISUSER Prescribers with Privileges

4 Print PSDRPH Key Holders

5 Print Setting Parameters Privileges

6 Print Audits for Prescriber Editing

7 Changes to DEA Prescribing Privileges Report

8 Allocation Audit of PSDRPH Key Report

9 Enter/Edit EPCS Access Reports Parameters

10 Allow VA Number if DEA Number Expired

11 Set Pharmacy Operating Mode

12 Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Select #7 ‘Changes to DEA Prescribing Privileges Report and then press Enter.

Expected Results

The “Beginning Date:” prompt is displayed. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Enter the begin date and then press Enter.

Expected Results

The “Ending Date:” prompt is displayed. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Enter the end date and then press Enter.

Expected Results

The “DEVICE: HOME//” prompt is displayed. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Press Enter to select the default and verify that the report is generated on demand.

Expected Results

The DEA Prescribing Privileges Report is displayed on demand.

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Navigate back and select DEA Prescribing Privileges Report option.

Expected Results

The “Beginning Date:” prompt is displayed. Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Enter the begin date and then press Enter.

Expected Results

The “Ending Date:” prompt is displayed. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Enter the end date and then press Enter.

Expected Results

The “DEVICE: HOME//” prompt is displayed. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Enter the name of a printer when available or P-MESSAGE-HFS

to email in the test environments and then press Enter. Expected Results

The “Subject:” prompt is displayed. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Enter the subject and then press Enter.

Expected Results

The “Select one of the following: M Me

P Postmaster” prompt is displayed

Press Enter to select the default option.

Expected Results

The “Send mail to: XXXX.XXXX//” option is displayed.

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “Select basket to send to: IN//” option is displayed. Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “And Send to:” option is displayed. Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “Moving to MailMan message...

.............................

Finished moving.

Sending [NNNNNN]...” is displayed. Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “Send mail to: XXXX.XXXX//” option is displayed. Note the number of the message displayed. Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Navigate to Mailman menu

Expected Results

Mailman menu is displayed. Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Select the RML option

Expected Results

The “Select message reader: Classic//” prompt is displayed. Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The “Read mail in basket: IN//” prompt is displayed. Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The “IN Basket Message: 1//” prompt is displayed. Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Enter the message number from Step 16 and verify that the report is received.

Expected Results

The DEA Prescribing Privileges Report is received in the email on demand. Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Verify the report includes schedule data stored in file #200, which is related to the provider’s VA #.

Expected Results

The data in the report is from file #200, it will be indicated with “(#200)” as seen in the following example: ANWER,MOHAMED H ANWER,MOHAMED H SCHEDULE V

ORIGINAL DATA: 0

EDITED DATA: 1 (#200) Comments

Validates

Attachments

**Step 23**

**Execution Step**

Description\*

Verify the report includes schedule and expiration date

data stored in file #8991.9 which is related to the provider’s DEA#. Expected Results

The data in the report is from file 8991.9, it will appear as in the following examples: ANWER,MOHAMED H ANWER,MOHAMED H SCHEDULE II NARCOTIC ORIGINAL DATA: 1

EDITED DATA: 0

ANWER,MOHAMED H ANWER,MOHAMED H EXPIRATION DATE ORIGINAL DATA: AUG 31,2021

EDITED DATA: AUG 31,2018

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216272: CAS\_MPDU\_TS\_1.2.1.03\_Modify the Changes to DEA Prescribing Privileges Report PSO EPCS LOGICAL ACCESS(B)**



Creation Date: Feb 8, 2019 6:28:47 AM (UTC-06:00) Last Modified: Feb 8, 2019 6:45:51 AM (UTC-06:00) State: Under Review

Originator: Gupta, Poonam (AbleVets) Owner: Gupta, Poonam (AbleVets)

Type: Manual

Test Data: Unassigned

Copied From:CAS\_MPDU\_TS\_1.2.1.03\_Modify the Changes to DEA Prescribing Privileges Report PSO EPCS LOGICAL ACCESS(A) Copied To:Copy of CAS\_MPDU\_TS\_1.2.1.03\_Modify the Changes to DEA Prescribing Privileges Report PSO EPCS LOGICAL ACCESS(B)

Description: The following test case will verify the modifications made to DEA PRESCRIBING PRIVILEGES Report.

• The ability to email the report when run automatically.

• If no value for report device or email group, deliver by email to holders of PSDMGR key when report runs automatically.

• When the report is run automatically, I want it sent to printer defined by PSO EPCS LOGICAL ACCESS REPORT DEVICE

• When the report is run automatically, I want it sent to the email address defined by PSO EPCS LOGICAL ACCESS REPORT EMAIL GROUP.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

The report output separated by division.

Fileman access to 8991.9 for site to be requested.

The Pharmacy Manager should have a mail group available in which he is a member to set and receive the Changes to DEA PRESCRIBING PRIVILEGES Report.

The providers with multiple divisions (as defined in file 200 or 8991.9) to appear in the report section for each of their divisions.

· The report will include schedule data stored in file #200 which is related to the provider’s VA#.

**Note:** Setup data using “Allocation of Security Keys/De-allocation of Security Keys” options from “Key Management” menu.

**Step 2**

**Execution Step**

Description\*

Log into VistA instance using user credentials.

Expected Results s

The primary menu is displayed. Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Navigate to Taskman Management menu.

Expected Results

The Taskman Management menu is displayed.

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Select Schedule/Unschedule Options

Expected Results

The “Select OPTION to schedule or reschedule” prompt is displayed. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Enter “TASK CHANGES TO DEA PRESCRIBIN” and then press Enter.

Expected Results

The “Are you adding 'PSO EPCS LOGICAL ACCESS' as

a new OPTION SCHEDULING (the NNNTH)? No//:” prompt is displayed.The “Ending Date:” prompt is displayed. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Navigate to “QUEUED TO RUN AT WHAT TIME:” prompt and enter the time to run the nightly scheduled job and then press Enter: Expected Results.

Expected Results

Navigate to the command prompt at the bottom of the screen, then type Save and then press Enter. Expected Results

The scheduled job is saved to run in the background at the time requested above.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Press Enter to select the default and verify that the report is generated on demand.

Expected Results

The DEA Prescribing Privileges Report is displayed on demand.

Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Navigate to Mailman menu

Expected Results

Mailman menu is displayed. Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Select the RML option.

Expected Results

The “Select message reader: Classic//” prompt is displayed.

Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Press Enter to select the default

Expected Results

The “Read mail in basket: IN//” prompt is displayed. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Enter the name of a printer when available or P-MESSAGE-HFS

to email in the test environments and then press Enter. Expected Results

The “IN Basket Message: 1//” prompt

is displayed along with the “last number” in the mail box. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Enter the last message number displayed above.

Expected Results

It is verified that the PSO EPCS Logical Report is received in the email when the report is run automatically.

Note: If the parameters explained below are NULL or not set to a value, the report should be delivered to all users holding the PSDMGR key. Reach out to other users and verify that they received the report as an email in MAILMAN.

If both the device and email group parameters explained below are set,

the reported should be printed and an email will be sent to the email group. Comments

Validates

Attachments

**Step 13**

**Information Step**

Description\*

XUEPCS LOGICAL ACCESS REPORT DEVICE

This can be tested only in the environments where a physical printer is available.

**Step 14**

**Execution Step**

Description\*

Navigate to XPAR MENU TOOLS menu and then select “ EP Edit Parameter Values” option.

Expected Results

The “Select PARAMETER DEFINITION NAME:” prompt is displayed. Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Enter “PSO EPCS LOGICAL ACC REPORT DEV” and then press Enter.

Expected Results

The “Select device for logical access report:” prompt is displayed. Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “Send mail to: XXXX.XXXX//” option is displayed. Note the number of the message displayed.

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Enter the name of your local printer and then press Enter.

To make the parameter NULL enter “@” at the prompt and then press Enter. Expected Results

The parameter is set to the printer entered above. Comments

Validates

Attachments

**Step 18**

**Information Step**

Description\*

XUEPCS LOGICAL ACCESS REPORT EMAIL GROUP

**Step 19**

**Execution Step**

Description\*

Navigate to XPAR MENU TOOLS menu and then select “ EP Edit Parameter Values” option. Expected Results

The “Select PARAMETER DEFINITION NAME:” prompt is displayed. Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Enter “PSO EPCS LOGICAL ACCESS REPORT EMAIL” and then press Enter. Expected Results

Expected Results

Enter the mail group and then press Enter.

Note: To make the parameter NULL enter “@” at the prompt and then press Enter. Expected Results

The parameter is set to the email group entered above.

The “Select Logical Access Report Email Group:” prompt is displayed. Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Run the steps 1 through 12 to run the job and email the report. Expected Results

Expected Results

It is verified that the report is received by all the members of the mail group. End of Test. Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216274: CAS\_MPDU\_TS\_1.2.1.04\_Modify the Allocation Audit of**



**PSDRPH Key Report PSO EPCS PSDRPH AUDIT(A)**

Creation Date: Feb 8, 2019 7:05:54 AM (UTC-06:00) Last Modified: Mar 7, 2019 9:12:36 AM (UTC-06:00) State: Under Review

Originator: Gupta, Poonam (AbleVets) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.2.1.04\_Modify the Allocation Audit of PSDRPH Key Report PSO EPCS PSDRPH AUDIT(A) Description: Ability to print the report in demand.

Ability to print the report.

Ability to email the report when run on demand.

Ability to deliver the report to device, email or both (both is for automatic only)

User must be a holder of PSDMGR key (if no value for report device or email group)

Setup data using “PSO EPCS PSDRPH KEY” option. Run 1.0.1.04 before executing this test case

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

The print option cannot be tested in the testing environments. P-MESSAGE-HFS option is used in lieu of printing.

**Step 2**

**Execution Step**

Description\*

Log in to your VistA instance using user credentials.

Expected Results

The primary VistA menu is displayed.

Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Navigate to EPCS DEA UTILITY FUNCTIONS menu.

Expected Results

ALLOCATION AUDIT OF PSDRPH KEY REPORT is displayed as a menu item. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Select ALLOCATION AUDIT OF PSDRPH KEY REPORT option.

Expected Results

The “Beginning Date:” prompt is displayed. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Enter the begin date and then press Enter.

Expected Results

The “Ending Date:” prompt is displayed. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Enter the end date and then press Enter.

Expected Results

The “DEVICE: HOME//” prompt is displayed.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The ALLOCATION AUDIT OF PSDRPH KEY REPORT is displayed on demand. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Navigate back and select ALLOCATION AUDIT OF PSDRPH KEY REPORT option.

Expected Results

The “Beginning Date:” prompt is displayed. Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Enter the begin date and then press Enter.

Expected Results

The “Ending Date:” prompt is displayed. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Enter the end date and then press Enter

Expected Results

The “DEVICE: HOME//” prompt is displayed. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Enter the name of a printer if available or P-MESSAGE-HFS to email and then press Enter.

Expected Results

The “Subject:” prompt is displayed. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Enter the subject and then press Enter.

Expected Results

The “Select one of the following: M Me

P Postmaster” prompt is displayed

Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “Send mail to: XXXX.XXXX//” option is displayed. Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “Select basket to send to: IN//” option is displayed. Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “And Send to:” option is displayed.

Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “Moving to MailMan message...

............................. Finished moving.

Sending [NNNNNN]...” is displayed. Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Press Enter to select the default option.

Expected Results

The “Send mail to: XXXX.XXXX//” option is displayed. Note the number of the message displayed. Comments

Validates

Attachments

**Step 18**

**Execution Step**

Description\*

Navigate to Mailman menu

Expected Results

Mailman menu is displayed. Comments

Validates

Attachments

**Step 19**

**Execution Step**

Description\*

Select the RML option.

Expected Results

The “Select message reader: Classic//” prompt is displayed. Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The “Read mail in basket: IN//” prompt is displayed. Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The “IN Basket Message: 1//” prompt is displayed. Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Enter the message number from Step 16.

Expected Results

The ALLOCATION AUDIT OF PSDRPH KEY REPORT is received in the email on demand. Rename the XU EPCS PSDRPH AUDIT report to PSO EPCS PHARMACIST ACCESS REPORT

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216275: CAS\_MPDU\_TS\_1.2.1.04\_Modify the Allocation Audit of**



**PSDRPH Key Report PSO EPCS PSDRPH AUDIT(B)**

Creation Date: Feb 8, 2019 7:20:16 AM (UTC-06:00) Last Modified: Feb 8, 2019 7:49:13 AM (UTC-06:00) State: Under Review

Originator: Gupta, Poonam (AbleVets) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.2.1.04\_Modify the Allocation Audit of PSDRPH Key Report PSO EPCS PSDRPH AUDIT(B) Description: The following test case will verify the modifications made to PSO EPCS PSDRPH AUDIT Report.

• I want the ability to email the report when run automatically.

• If no value for report device or email group, deliver by email to holders of PSDMGR key when report runs automatically.

• When the report is run automatically, I want it sent to printer defined by PSO EPCS PHARMACIST ACCESS REPORT DEVICE.

• When the report is run automatically, I want it sent to the email address defined by PSO EPCS PHARMACIST ACCESS REPORT EMAIL GROUP.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

**Step 2**

**Execution Step**

Description\*

Log in to your VistA instance using user credentials.

Expected Results

The primary VistA menu is displayed. Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Navigate to Taskman Management menu.

Expected Results

The Taskman Management menu is displayed. Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Select Schedule/Unschedule Options.

Expected Results

The “Select OPTION to schedule or reschedule:” prompt is displayed. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Enter “PSO EPCS LOGICAL ACCESS” and then press Enter.

Expected Results

Enter “PSO EPCS LOGICAL ACCESS” and then press Enter. Expected Results

A list of options is displayed

1 PSO EPCS LOGICAL ACCESS Task Changes to DEA Prescribing Privileges Report

2 PSO EPCS LOGICAL ACCESS REPORT Changes to DEA Prescribing Privileges Report

CHOOSE 1-2: The CHOOSE 1-2: prompt is displayed. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Enter 1 and then press Enter. PSO EPCS LOGICAL ACCESS

Expected Results

The “Select OPTION to schedule or reschedule: prompt is displayed. Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Navigate to “QUEUED TO RUN AT WHAT TIME” prompt and enter the time to run the scheduled job and then press Enter:

Expected Results

The time for the job to run in entered. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Navigate to the command prompt at the bottom of the screen, then type Save and then press Enter.

Expected Results

The scheduled job is saved to run in the background at the time requested above. Comments

Validates

Attachments

**Step 9**

**Execution Step**

Description\*

Navigate to Mailman menu

Expected Results

Mailman menu is displayed. Comments

Validates

Attachments

**Step 10**

**Execution Step**

Description\*

Select the RML option.

Expected Results

The “Select message reader: Classic//” prompt is displayed. Comments

Validates

Attachments

**Step 11**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The “Read mail in basket: IN//” prompt is displayed. Comments

Validates

Attachments

**Step 12**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The “IN Basket Message: 1//” prompt is displayed along with the “last number” in the mail box. Comments

Validates

Attachments

**Step 13**

**Execution Step**

Description\*

Enter the last message number displayed above.

Expected Results

The Allocation Audit of PSDRPH Key Report is received in the email when the report is run automatically.

Note: If the parameters explained below are NULL or not set to a value, the report should be delivered to all users holding the PSDMGR key. Reach out to other users and verify that they received the report as an email in MAILMAN.

If both the device and email group parameters explained below are set, the reported should be printed and an email will be sent to the email group.

XUEPCS PHARM ACC REPORT DEVICE

This can be tested only in the environments where a physical printer is available. Comments

Validates

Attachments

**Step 14**

**Execution Step**

Description\*

Navigate to XPAR MENU TOOLS menu and then select “ EP Edit Parameter Values” option.

Expected Results

The “Select PARAMETER DEFINITION NAME:” prompt is displayed. Comments

Validates

Attachments

**Step 15**

**Execution Step**

Description\*

Enter “XUEPCS PHARM ACC REPORT DEVICE” and then press Enter.

Expected Results

The “Select device for Pharmacist Acc Report:” prompt is displayed. Comments

Validates

Attachments

**Step 16**

**Execution Step**

Description\*

Enter the name of your local printer and then press Enter.

Expected Results

The parameter is set to the printer entered above.

Comments

Validates

Attachments

**Step 17**

**Execution Step**

Description\*

Run the steps 1 through 12 to run the job and print the report.

Expected Results

The report is printed at the device. Comments

Validates

Attachments

**Step 18**

**Information Step**

Description\*

XUEPCS PHARM ACC REPORT EMAIL GROUP

**Step 19**

**Execution Step**

Description\*

Navigate to XPAR MENU TOOLS menu and then select “EP Edit Parameter Values” option.

Expected Results

The “Select PARAMETER DEFINITION NAME:” prompt is displayed

Comments

Validates

Attachments

**Step 20**

**Execution Step**

Description\*

Enter “XUEPCS PHARM ACC REPORT EMAIL” and then press Enter.

Expected Results

The “Select Pharmacist Acc Report Email Group:” prompt is displayed

Comments

Validates

Attachments

**Step 21**

**Execution Step**

Description\*

Enter the mail group and then press Enter.

Expected Results

The parameter is set to the printer entered above. Comments

Validates

Attachments

**Step 22**

**Execution Step**

Description\*

Run the steps 1 through 12 to run the job and print the report.

Expected Results

The report is received by all the members of the mail group. End of Test.

Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**

**216280: CAS\_MPDU\_TS\_1.2.1.04\_Modify the Allocation Audit of**



**PSDRPH Key Report PSO EPCS PSDRPH AUDIT (C)**

Creation Date: Feb 8, 2019 7:57:21 AM (UTC-06:00) Last Modified: Mar 8, 2019 8:31:14 AM (UTC-06:00) State: Under Review

Originator: Gupta, Poonam (AbleVets) Owner: Gupta, Poonam (AbleVets) Type: Manual

Test Data: Unassigned

Copied To:Copy of CAS\_MPDU\_TS\_1.2.1.04\_Modify the Allocation Audit of PSDRPH Key Report PSO EPCS PSDRPH AUDIT (C) Description: The report output separated by division.

The providers with multiple divisions (as defined in file 200) to appear in the report section for each of their divisions. An indicator that the data is duplicated throughout the report.

A provide associated with multiple divisions is existing.

The Pharmacy Manager should have a mail group available in which he is a member to set and receive the DEA PRESCRIBING PRIVILEGES Report.

**Summary**

**Categories**

Function: Unassigned

Test Phase: Unassigned

**Formal Review**

General Comments

**Manual Steps**

**Step 1**

**Information Step**

Description\*

**Note to Internal testing use only:**

This test script was executed in the SQA test environment and is meant as a guideline for IOC testing. You may experience a slight variance in system responses when executing this test script due to your site’s test environment, VistA configuration, and/or test data. Please be sure to consider your site’s configuration and workflow as you execute this test script and adjust accordingly.

• All data is for demonstration purposes only and not to taken as actual values

**Step 2**

**Execution Step**

Description\*

Log in to your VistA instance using user credentials.

Expected Results

The primary VistA menu is displayed. Comments

Validates

Attachments

**Step 3**

**Execution Step**

Description\*

Navigate to EPCS DEA UTILITY FUNCTIONS menu.

Expected Results

Allocation Audit of PSDRPH Key Report is displayed as a menu item.

1 DEA Expiration Date Report

2 Print Prescribers with Privileges

3 Print DISUSER Prescribers with Privileges

4 Print PSDRPH Key Holders

5 Print Setting Parameters Privileges

6 Print Audits for Prescriber Editing

7 Changes to DEA Prescribing Privileges Report

8 Allocation Audit of PSDRPH Key Report

9 Enter/Edit EPCS Access Reports Parameters

10 Allow VA Number if DEA Number Expired

11 Set Pharmacy Operating Mode

12 Edit Facility DEA# and Expiration Date

Comments

Validates

Attachments

**Step 4**

**Execution Step**

Description\*

Select number 8 - Allocation Audit of PSDRPH Key Report.

Expected Results

The “Beginning Date:” prompt is displayed. Comments

Validates

Attachments

**Step 5**

**Execution Step**

Description\*

Enter the begin date and then press Enter.

Expected Results

The “Ending Date:” prompt is displayed. Comments

Validates

Attachments

**Step 6**

**Execution Step**

Description\*

Enter the end date and then press Enter.

Expected Results

The “DEVICE: HOME//” prompt is displayed.

Comments

Validates

Attachments

**Step 7**

**Execution Step**

Description\*

Press Enter to select the default.

Expected Results

The PSO EPCS PSDRPH AUDIT report is available on demand and the data is verified. Comments

Validates

Attachments

**Step 8**

**Execution Step**

Description\*

Verify that the data is separated by Division.

Verify that the providers with multiple divisions appear in the respective divisions. Verify that an indicator that the data is duplicated appears throughout the report.

Expected Results

The data in the report is separated by each division.

Providers associated with multi-divisions are displayed in their respective divisions, if they meet these criteria . An indicator is present indicating that the provider is associated with multiple divisions, if they meet these criteria.

End of Test. Comments

Validates

Attachments

**Associated Electronic Signatures**

**Signed Action Signer Comment Additional Information**