INSIGHT

THE QS/1 MAGAZINE

July 2002

QS/1 Senior Staff

From left to right: Sonny Anderson, Director of Product Development; Russ Weber, V.P. of Operations; Revonda Spratt, Product Services Manager; Chris Cox, Director of Product Support; Bill Cobb, President QS/1; Tammy Devine, V.P. of Marketing.

Celebrating our 25th anniversary as a company gives us an opportunity to look back on where we've been and how we've changed. But even more exciting to me is that QS/1 continues to grow.

QS/1 recently announced the acquisition of CornerDrugstore.com, a premier online retail pharmacy website, with over 800 independent and regional chain pharmacy customers across the country. This purchase reflects our belief that people will increasingly use the Internet to communicate with their pharmacies.

What is special about CornerDrugstore.com? The fastest growing segment of Internet users is older Americans, a group who is also the largest user of pharmacy services. For all consumers, the Internet is simply convenient. A service like CornerDrugstore.com could change the way people purchase prescription drugs and over-the-counter items-just as Amazon.com has changed the way many people buy books.

We believe that CornerDrugstore.com will be a powerful tool for your customers and for you. Prescription refills that come in through your site can be filled at your pharmacy's convenience, and customers have the opportunity to shop for your over-the-counter products as well.

We're moving the CornerDrugstore.com system to Spartanburg from its previous location in Maryland, and we're already making plans for enhancements. Our plans include verification tools that will interact with your pharmacy system as well as inventory tools that will work with your POS system.

As we celebrate QS/1's beginning 25 years ago, it's exciting to embark on another new adventure. We'll continue changing and growing-so that you can, too.

Bill Cobb
President, QS/1 Data Systems

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UV INKS NO VOC'S®

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The working of claim denials is often the last item on an individual's To-Do list. Unfortunately, this scenario places the profitability and worse, the future of the company at significant risk. I have seen this first hand throughout my years in this industry. The first thing to be aware of is why claims are being denied. To that end, Palmetto GBA has compiled a list of their 10 most common denial codes issued. Let's take a few moments to review this list and identify ways to avoid future denials.

The Top 10 Denials

By: Duane Ridenour
Industry Analyst, QS/1 SystemOne

Rank	***Code***	***Description***
#10	*CO-109*	The beneficiary is with an HMO or another Medicare contractor that handles claims for this/these service(s). Verify the beneficiary's address since the address Medicare has may actually be different than where the patient resides. You may be billing for services that should be billed to a different carrier, such as inpatient or physician services. Also, a beneficiary's HIC number may change based on their eligibility.
#9	*B-7*	This provider was not certified for this procedure/service on this date of service. Contact NSC for the effective date of your provider number. It is also possible that your provider number was inactivated for the dates of service you are billing.
#8	*CO-22*	May be covered by another payer per Coordination Of Benefits. If the patient has another insurance policy, Medicare may be secondary. Resubmit the claim on paper with the primary carrier EOB. It is also possible that Medicare has not been notified that they are now primary.
#7	*CO-50*	Deemed to be non-medically necessary. Review the medical policy information for the item(s) supplied. Verify the patient qualifies for the item(s) based on the medical policy. Do you have the appropriate documentation? If so, do you need to include the KX modifier advising Medicare of that fact?
#6	*CO-13*	The date of death precedes the date of service. Medicare has been notified that the beneficiary has died. Verify that the patient has, in fact, died and that the equipment has been picked up. If you are in contact with your patients on a monthly basis, this error should virtually disappear. An inventory control system will also help to eliminate this denial.
#5	*CO-35*	Benefit maximum reached. This denial is often related to those patients who change suppliers in the middle of the capped rental process. Unless you can prove a Break in Need or another supplier has incorrectly billed, you will not be able to secure reimbursement except for maintenance every six months. It is strongly recommended that you obtain a copy of both the previous supplier's pickup ticket and original CMN. These documents will assist in billing correctly for this/these items.
#4	*CO-57*	Claim denied or reduced as DMERC deems information does not support this service, this number of services, length of service or dosage. According to Medicare's records, this item is the same or similar equipment to what they already have. More information is necessary to justify this number of services/items for the dates of service indicated. You will need to provide additional documentation for this claim supporting the need. This documentation could include a Physician's Order and test results.
#3	*B-17*	Claim denied because this service was not prescribed by a physician, not prescribed before delivery, the prescription is incomplete, or the prescription is not current. Either a CMN was not received by the carrier or the HCPCS code is invalid. Resubmit the claim with a correct HCPCS and/or CMN.
#2	*PR-46*	This service is not covered. A claim was submitted for a non-covered item. If the original claim was submitted at the beneficiary's request and a GA modifier was used, the EOMB will indicate the amount for which the patient is responsible. See the new ABN policy for additional information.
#1	*CO-18*	Duplicate claim. The claim has already been received and is either in process or has been processed. This denial is also received for claims that were resubmitted but should have been sent with a Request for Review. Only claims that are returned or rejected can be resubmitted; denials must be sent for Review.

You can easily identify if a claim can be resubmitted or must be sent in for Review by comparing the first five digits of the CCN* (Claim Control Number) to the EOMB date. It will be necessary to convert the EOMB date to a Julian Date. Typically, if the date of the CCN is within 4 - 5 days of EOMB, then the claim was simply rejected. However, if the difference is 6 or greater, you will need to send the claim in for Review.

For example, the date of the EOMB is 4/15/02. The date is converted to a Julian date of 02105, the 105th day of 2002. One CCN begins with 02102 and another begins with 02098. The first CCN can be resubmitted as the difference between the two dates is 3, unlike the second example, because the difference between the dates of the EOMB and the CCN is 7. That rule of thumb is a simple guideline which can help to reduce your CO-18 denials. * Region C uses ICN rather than CCN.

Remember, effective working of your denials determines the success and profitability of your HME services. Using this list of Top 10 Medicare Denials will help to reduce your denials and result in lowering your Days Sales Outstanding (DSO).

What's New HIPAA

In an effort to keep our customers informed, QS/1 first told you about HIPAA in the winter 2001 edition of Insight. Subsequent articles in the spring and summer of that year, and in January of this year, helped to keep customers current on information regarding this landmark legislation. Over the past three months, there have been proposed changes to the privacy rules portion of the legislation. In addition, several PBM's have outlined their plans for migration to NCPDP v5.1. Once again, we feel it is necessary to let you know what we know.

Proposed Rule Changes

The biggest news of the last three months with regards to HIPAA were the proposed rule changes that were announced in March. The most important piece of these proposed rule changes was the elimination of the consent requirement. In its place is an acknowledgment of privacy practices. In the proposed rule, patients would be asked to acknowledge receipt of the privacy rights and practices of the healthcare provider. If patients refuse to sign an acknowledgment, service could still be provided, unlike the consent rule. The healthcare provider would need to document the reason(s) why acknowledgment was not obtained.

There are other proposed rule changes. For example, the "minimum necessary" rule would be modified. If a pharmacist discusses a patient's treatment on the phone with a doctor and is overheard by another patient, this would no longer be an automatic violation of privacy rules. In other words, taking reasonable steps to try to prevent disclosure would be sufficient. Other proposed rule changes involve authorizations, specifically in the area of marketing. The proposed rules define what marketing is and require authorization before a customer can be contacted for marketing purposes. Refill reminder programs are not marketing programs, as they are considered treatment.

The bottom line for these proposed rule changes: they are proposed rule changes. At the time that this article is written (June 15th), consents are still required. Regardless of what sets of rules are used, compliance is mandatory on April 16, 2003.

NCPDP v5.1

There is a lot of confusion about NCPDP v5.1 for pharmacy claims. NCPDP v5.1 was listed as a standard in the regulations published by the Department of Health and Human Services (HHS). In this document, HHS indicated that compliance was required by October 16, 2002. An extension was signed into law extending this deadline until October 16, 2003. Despite these dates, there are PBMs mandating transmission of claims in the NCPDP v5.1 format as early as June of this year.

How is this possible? HHS talks about mandatory compliance with the transaction sets rule. It does not address implementation between business partners. Therefore, Merck-Medco can require claims be sent in the NCPDP v5.1 format prior to October 2003, and that is exactly what they have done. As of this writing, PAID prescriptions are required to be in the NCPDP v5.1 format by September 28, 2002. Other PBMs have their own implementation plans.

QS/1 will continue to monitor changes to HIPAA, and we will report these changes to you as situations warrant. However, you should not count on QS/1 to be your sole source of information on this subject. The Office for Civil Rights is the branch of HHS that is responsible for enforcement of the privacy standards, and can be found at http://www.hhs.gov/ocr/hipaa. The main HHS web site for HIPAA can be found at http://aspe.hhs.gov/admnsimp/Index.htm. The National Association of Chain Drug Stores (NACDS) has good summary information on HIPAA; the association's web site is http://www.nacds.org. ClarEDI is one of the testing organizations for transaction set compliance, and their HIPAA web site is http://www.hipaa.org.

By: Rich Muller
Industry Analyst Manager, QS/1

The Canadian Perspective

Toward the end of the 1970's the Nova Scotia Pharmaceutical Society formed a committee to research pharmacy computer systems in Canada and the United States. The need for better patient medication records and the proliferation of government and private drug benefit programs created a need for improved efficiency in pharmacies, which could be provided by computer technology.

John J. Ryan

The Pharmacy Organization, along with IBM Canada, examined a number of pharmacy computer systems being introduced, particularly in the United States. After carefully evaluating what was available, a decision was made to establish a cooperative relationship with Smith Data Processing in Spartanburg, South Carolina. Their QS/1 System best met the criteria developed by the Society. A company known as Atlantic Pharmaceutical Services Incorporated (APSI) was formed to manage the Canadian operation in 1984.

The first QS/1 Pharmacy System was sold to Lawtons Drugs of Halifax in 1980. The first system installed in Atlantic Canada was at MacQuarrie's Drug Store in Truro, Nova Scotia, in 1980. MacQuarrie's remains a customer of QS/1 Canada. From 1980 to 2002, QS/1 systems were installed in Alberta, Ontario, and the four Atlantic provinces, primarily in independent pharmacies, and a great majority of these pharmacies remain loyal QS/1 customers.

In 1984, an agreement was signed between APSI and Smith Data Processing for SDP to market the QS/1 Pharmacy System in Canada. An office was opened in Halifax the same year. The QS/1 Canada office is now located in a new and larger facility in the Bayers Lake Park in Halifax. QS/1 Canada now has a staff of 10 in Halifax, up from four in 1984. In addition to sales and training, QS/1 Canada now provides hardware and software support to more than 270 customers.

During the past 18 years, QS/1 Canada has worked in cooperation with QS/1 in the United States to respond to customer requests for enhancements to the Pharmacy System, the Home Health Care (DME) program, the Nursing Home Program and the Point-of-Sale System. Seminars are held to update customers with new releases and help them implement the enhancements in their pharmacies.

In 1988, QS/1 Canada was selected by the Canadian Olympics Committee to provide pharmacy computer services for the Calgary Olympics. Another noteworthy activity was QS/1 Canada's participation on the Canadian Pharmacists Association Electronic Claims Committee, which developed Version 3 of the Canadian Pharmacy Electronic Claims Standard. QS/1 continues to work with the Canadian Pharmacists Association on the latest version of the claims standard. QS/1 is also represented on the Third Party Committee of the Pharmacy Association of Nova Scotia. QS/1 has held international meetings throughout Canada in Halifax, Montreal and Toronto.

The management and staff of QS/1 Canada look forward to providing the best in pharmacy computer services, DME, nursing home systems, and POS systems in the coming years.

By: John J. Ryan
Manager of QS/1 Data Systems, Ltd., Canada
1984 - 1992

CornerDrugstore.com

May 1, 2002—J M Smith Corporation acquires CornerDrugstore.com from Rockville, Maryland-based SymRx, Inc.

CornerDrugstore.com is a premier online retail pharmacy website, with over 800 independent and regional chain pharmacy customers from across the country. Pharmacies use CornerDrugstore.com to extend their local store and information services to the Internet where their customers can order prescription refills and over-the-counter products, in addition to getting answers to their health, drug, and disease information questions.

J M Smith CEO Bill Cobb said that CornerDrugstore.com is a good fit with J M Smith's other products and services. "We have over 55 years of experience in the pharmacy industry, from wholesale drug distribution to advanced computer technologies. And we believe that online retailing will continue to grow in the pharmacy industry as it has in other retail environments."

SymRx CEO Tom Menighan expressed confidence in the benefits of this acquisition for CornerDrugstore.com. "The long-term interests of our pharmacy customers will be well served by this acquisition," said Menighan. "The future of CornerDrugstore.com is in great hands."

CornerDrugstore.com was created by the National Community Pharmacists Association (NCPA). "When NCPA began work on the CornerDrugstore.com concept, it was with the goal of creating a virtual network of independent pharmacies across the nation," said Bruce Roberts, executive vice president and CEO of NCPA. "We remain committed to that goal. We believe that J M Smith Corporation has the resources to execute the CornerDrugstore.com initiative, and we are pleased that the company has committed to maintaining a software system neutral platform for CornerDrugstore.com."

J M Smith Corporation, founded in 1944, is one of South Carolina's Top 10 privately held companies, employing over 650 people throughout North America. J M Smith companies include QS/1 Data Systems, Smith Drug Company, Smith Data Processing, and Smith Premier Services.

QS/1® 25 YEARS

Hyatt Regency Hotel

Greenville, South Carolina
August 21-25, 2002

Agenda

Wednesday

12:00 pm	Buses Depart for Biltmore Estate or the Golf Outing
4:00 pm – 6:00 pm	Registration
6:30 pm – 7:30 pm	Welcome Reception - Join us for hors d'oeuvres & drinks

Thursday

7:45 am – 8:30 am	Registration – Continental Breakfast
8:30 am – 9:00 am	Welcome and Introductions
9:00 am – 10:30 am	Speaker: Michael Bell – (HIPAA, 1.5 CE Hrs.)
10:30 am – 11:00 am	Coffee Break
11:00 am – 12:00 pm	Speaker: Jack Guinan – (E-Prescribing, 1.0 CE Hrs)
12:00 pm – 1:00 pm	Lunch Provided
1:00 pm – 3:00 pm	**Product Tracks**
3:00 pm – until	Afternoon Break & Visit Vendor Exhibits

Friday

8:00 am – 9:00 am	Continental Breakfast
9:00 am – 10:30 am	Speaker: Don Lassiter - (Credit Card Fraud, 1.5 CE Hrs.)
10:30 am – 11:00 am	Coffee Break
11:00 am – 12:00 pm	Speaker: Duane Ridenour - (Starting an HME Business, 1.0 CE Hrs.)
12:00 pm – 1:00 pm	Lunch Provided
1:00 pm – 3:00 pm	**Product Tracks**
3:00 pm – until	Afternoon Break & Visit Vendor Exhibits

Saturday

8:00 am – 9:00 am	Continental Breakfast
9:00 am – 9:30 am	Enterprise
9:30 am - 10:30 am	Speaker: Gene Reeder (Medication Errors, 1.0 CE Hrs.)
10:30 am – 11:00 pm	Coffee Break
11:00 am - 12:00 pm	**Product Tracks**
12:00 pm – 1:00 pm	Lunch Provided
1:00 pm – 2:00 pm	Questions - Open Forum
2:00 pm – 2:30 pm	QS/1 25th Anniversary Video
4:00 pm - Until	Buses Depart for QS/1 Headquarters

Sunday

8:00 am – 9:00 am	Continental Breakfast
9:00 am – 10:00 am	POS Workshop
10:00 am – 10:30 am	Coffee Break
10:30 am – 12:00 pm	POS Workshop (cont.)

Technology Fair

Join QS/1 staff for product demonstrations and vendor exhibits for the latest product information.

Wednesday	4:00 pm – 6:00 pm
Thursday	3:00 pm – 5:00 pm
Friday	3:00pm–5:00pm

Note: Product demonstrations and exhibits will be open at all breaks.

Participating Vendors

AIS
Architext, Inc.
Lexmark
Proxymed
Hamacher Resources Group
Heartland Payment Systems
VFI – Statement Processing
Smith Drug Company
Smith Data Processing
Smith Premier Services
Telemanager Technologies, Inc.
Voice-Tech, Inc.

CUSTOMER CONFERENCE 2002 for RETAIL PHARMACY

Events

Biltmore Estate - Asheville, NC

More than a century ago, George Vanderbilt created a larger-than-life country retreat in North Carolina's Blue Ridge Mountains. Its centerpiece—Biltmore House—provided 250 rooms of hospitality to family and friends. Tickets to visit Biltmore on Wednesday afternoon are $40.00 per person (includes transportation and tickets to the estate.)

Golf at River Falls Plantation - Spartanburg, SC

River Falls Plantation is a Gary Player Signature Golf Course, just minutes from Greenville and Spartanburg. Multiple tee and pin placements provide an interesting mix of shots to test the imagination and strategic skills of all levels of golfers! Cost of the golf outing is $50.00 per person (includes transportation, golf and cart fee).

QS/1 Data Systems 25th Celebration Spartanburg, SC

Come join us for QS/1's 25th Anniversary Party at our Corporate Headquarters in Spartanburg, South Carolina. Many of our employees will be on hand to meet you and provide tours of our facility.

At the Spartanburg Auditorium, conference attendees and guests will enjoy more Southern hospitality, entertainment, and food. Extra tickets for non-registered guests are $25.00 per person (includes transportation, food and the festivities at the auditorium).

Product Tracks

		RxCare Plus	CRx
Thursday	**1:00 pm - 2:00 pm**	Interfaces	Using Report Writer
	2:00 pm - 2:30 pm	Using Reports	Managing Your Inventory
	2:30 pm - 3:00 pm	Advanced Security	-Cont.- Managing your Inventory
Friday	**1:00 pm - 2:00 pm**	17.2, 17.3, 17.4	6.1, 6.2, 6.3
	2:00 pm - 2:30 pm	Tickler File	Setting up Pricing
	2:30 pm - 3:00 pm	IVR, Internet, WebRx4U	-Cont.- Setting up Pricing
Saturday	**11:00 am - 11:30 am**	Customized Labels	IVR, Internet
	11:30 am - 12:00 pm	Disease Management	-Cont.- IVR, Internet
	1:00 pm - 1:30 pm	Basic Mode	
	1:30 pm - 2:00 pm	VFI	

CE Credits and Objectives

THE AMERICAN COUNCIL ON PHARMACEUTICAL EDUCATION

The Virginia Council on Pharmaceutical Education is approved by the American Council on Pharmaceutical Education as a provider of continuing pharmacy education. You can achieve a total of 6.0 contact hours (0.6 CEU's) after attending these programs and completing an evaluation. Certificates will be sent approximately 4 weeks after the program's completion.

The Impact of the Health Insurance Portability & Accountability Act of 1996 (HIPAA) on Pharmacy Operations

Michael D. Bell, Attorney at Law, Mintz Levin Cohn Ferris Glovsky and Popeo, ACPE Program # 155-000-02-025-L04 (1.5 Hrs.)

Objectives:

1. Understand the background, purpose and policy behind HIPAA;
2. Understand the importance of privacy and security from an enforcement, risk management, liability and compliance perspective;
3. Understand broadly the four components of the Security Standards;
4. Understand the Privacy Regulations' categories of uses and disclosures of protected health information;
5. Learn important terms and definitions such as: treatment, payment, operations, business associate, and minimum necessary;
6. Understand broadly patients' rights under the regulations; and
7. Identify tasks that the pharmacy organization should be undertaking to implement the regulatory requirements.

The Benefits of Electronic Prescribing to the Independent Pharmacy

Jack Guinan, J.D., Executive Vice President of Prescription Services, ProxyMed, Inc., ACPE Program #155-000-02-026-L04 (1.0 Hrs.)

Objectives:

1. Understand the benefits of using electronic prescribing,
2. List the types of messages that are available,
3. Identify how messages between the pharmacy and the presciber are exchanged, and
4. Know the status of electronic prescribing in the pharmacy industry today.

Credit Card Fraud Detection and Prevention

Don E. Lassiter, Senior Vice President, Heartland Payment Systems, Inc., ACPE Program #155-000-02-027-L04 (1.5 Hrs.)

Objectives:

1. Discuss Internet and mail order fraud and how AVS (Address Verification) can help,
2. Learn how to identify counterfeit card with handouts of examples,
3. Learn how to identify employees who may be skimming card numbers for later use,
4. Learn how to prevent charge backs and the rights of merchants in charge back circumstances, and
5. Learn how to identify and prevent employee fraud.

Preventing Costly Medication Errors

Dr. Gene Reeder, Professor of Pharmacy, University of South Carolina, ACPE Program #155-000-02-029-L04 (1.0 Hrs.)

Objectives:

1. Understand the importance of identifying and preventing medication errors,
2. Identify the major causes of medication errors,
3. List ways pharmacists can use existing tools to prevent medication errors, and
4. Discuss modifications in pharmacy workflow to help identify and prevent medication errors.

How to Succeed in HME

Duane Ridenour, HME Industry Analyst, QS/1 Data Systems, ACPE Program #155-000-02-028-L04 (1.0 Hrs.)

Objectives:

1. Learn the basic components necessary for starting an HME business,
2. Be able to identify the primary documents required for claims submission,
3. Recognize the most common abbreviations and acronyms used in the home medical equipment industry, and
4. Understand the elements necessary to be successful in the industry.

CUSTOMER CONFERENCE 2002 for RETAIL PHARMACY

Conference Keynote Speakers

Michael D. Bell, J.D.:
Michael is an attorney in Mintz Levin's Washington, D.C., office, where he practices in the firm's Health Care Section, specializing in legal and regulatory matters which arise under Medicare, Medicaid and other third party payment programs. Michael has worked with healthcare and pharmacy providers, as well as database architects and software designers, on the development of HIPAA-compliant information systems and practices.

Michael received his B.A. in economics from Wake Forest University and his Juris Doctor degree from Seton Hall University School of Law, with concentration in health law from the Health Law and Policy Program. He is a member of the Editorial Advisory Board for the *Report on Medicare Compliance*.

Jack Guinan, J.D.:
Jack Guinan joined ProxyMed in 1993 and currently serves as Executive Vice President, Prescription Services. Jack is responsible for complete Profit and Loss for all pharmacy related services at ProxyMed. Since 1993, he has led ProxyMed's efforts in developing and implementing online communications between physicians and pharmacies. Under his direction, ProxyMed has established the premier nationwide e-prescribing network connecting over 5,000 registered physicians with 30,000 contracted pharmacies.

Jack received his B.S. and Juris Doctor degrees from the University of Miami in Miami, FL. He is a member of the Florida Bar Association, National Association of Chain Drug Stores and the National Council of Prescription Drug Programs.

Don E. Lassiter:
Don E. Lassiter is currently serving as Board of Directors member and Senior Vice President of Heartland Payment Systems, Inc. He is also one of the three original founders of HPS, a full-service payment systems provider which processes claims for over 55,000 merchants of all types and sizes nation wide.

Don received a B.S. from Atlantic Christian College in Wilson, NC, and currently resides in Selma, NC, with his wife and family.

Dr. Gene Reeder:
Gene Reeder is professor of pharmacy at the University of South Carolina College of Pharmacy and the director of the Center of Outcomes Research and Evaluation. He is published widely in journals and has authored chapters in standard texts on such topics as the assessment of outcomes from health interventions, pharmaceutical outcomes, pharmacoeconomics, economics, and public policy.

Gene holds a B.S. in pharmacy, an M.S. in pharmacy administration, and a Ph.D. in business administration from the University of South Carolina.

Hotel Information

Reservations need to be made directly with the:

Hyatt Regency
220 North Main Stret
Greenville, SC 29601
1.800.233.1234

$109.00 per night for a single/double room

Fee Schedule

Registration:	$275.00
Spouse/Guest Registration:	$150.00
Golf:	$50.00
Biltmore Trip:	$40.00
Additional 25th Party Tickets:	$25.00

Registration Fee: Full Registration includes: Welcome Reception, CE Credits, General Sessions, Keynote Speakers, Workshops, Exhibits, Technology Fair, Continental Breakfast every morning, Luncheons on Thursday, Friday and Saturday, and dinner in Spartanburg on Saturday night. Spouse Registration includes: Same as Full Registration except no CE Credits. Additional tickets may be purchased for Saturday's festivities for non-registered guests for $25.00.

For more information, call QS/1 Marketing Support at 1.800.231.7776

QS/1 PrimeCare

Customer Conference 2002

October 3-5, 2002

Meeting Agenda

Thursday, October 3, 2002

6:30 pm – 8:00 pm	Welcome Reception Join us for hors d'oeuvres & drinks

Friday, October 4, 2002

7:30 am – 8:15 am	Continental Breakfast
8:15 am – 8:30 am	Welcome and Introductions
8:30 am – 9:30 am	*Speaker: Kathleen Cameron (Fleetwood Project)
9:30 am – 10:00 am	Morning Break and Hardware Expo
10:00 am – 11:00 am	Speaker: Jim Hancock (Fleetwood Project and PrimeCare)
11:00 am – 12:00 pm	*Speaker: Rodney Burton (LTC)
12:00 pm – 1:30 pm	Lunch Provided (Hardware Expo open 12:30 pm – 1:30 pm)
1:30 pm – 1:45 pm	Speaker: Brian Smith (ALPhA)
1:45 pm – 2:45 pm	*Speaker: Rich Muller (HIPAA)
2:45 pm – 3:15 pm	Afternoon Break and Hardware Expo
3:15 pm – 4:15 pm	Speaker: Chuck Gordon (Interfaces)
4:15 pm – 5:00 pm	Speaker: Rich Muller (Electronic Prescribing)
5:00 pm – 6:00 pm	Hardware Expo

Saturday, October 5, 2002

7:30 am – 8:15 am	Continental Breakfast
8:15 am – 8:30 am	Welcome and Introductions
8:30 am – 9:30 am	17.1 & 17.2 Quick Review and Workflow
9:30 am – 10:00 am	Morning Break and Hardware Expo
10:00 am – 12:00 pm	After 17.2 Preview: What's on the drawing board? New Report Functions, Advanced Security/Logging, Enterprise, and Enterprise Workflow
12:00 pm – 1:30 pm	Lunch Provided (Hardware Expo open 12:30 pm – 1:30 pm)
1:30 pm – 2:30 pm	Workshop I
2:30 pm – 2:45 pm	Afternoon Break and Hardware Expo
2:45 pm – 3:45 pm	Workshop II
3:45 pm – 4:00 pm	Closing Remarks

*CE credits will apply for the Fleetwood, HIPAA and LTC Presentations for a total of 3 CE Credits

OMNI HOTEL

100 CNN Center
Atlanta, GA 30335
404.659.0000

Reservations:
404.818.4300

Rate: $119/night

Special Room Rate Expires September 3, 2002

QS/1 Registration Fees

(Per Person)

$129.00 with CE Credits
$99.00 without CE Credits
$45.00 Spouse Registration

Full registration with CE includes welcome reception, CE credits, handout materials, all general sessions, breaks, continental breakfasts and lunches. Registration without CE credits includes everything but the CE Credits. Spouse Registration includes welcome reception, continental breakfasts and lunches.

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

Saturday, October 5, 2002

Workshop I

- Facility Setup (excluding Fill List)
- General & Management Reports
- A/R Overview, Posting, Reports & Statements

Workshop II

- Fill List Setup and Use
- Custom Reports & Data Export
- Billing: Matrix, Per Diem, Batch Transaction Update, Pending & Reconciliation

TRADE SHOWS

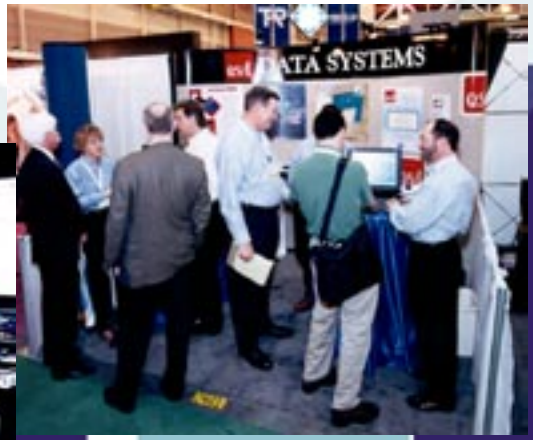
Tyler Thompson,
Rich Muller, and Gary
Throckmorton

NCPDP in Phoenix, AZ
March 24-26, 2002.

John Frady at NCPA with our youngest customer/prospect. She says, "QS/1 is #1!"

Sue Whitehead and Trainer Kim Stiffler
ASCP- 2002, Las Vegas, NV.

MedTrade West
Las Vegas, NV
April 2002



Sue Whitehead, Buddy Burk, Dennis Antici and Buford Abeldt

ASHP Midyear 2001
New Orleans, LA.

"Our new imaging features drew a lot of attention at ASHP in New Orleans."

Buddy Burk
National Sales Manager,
Retail Systems

From the Support Center

Important Facts about Converting to 17.1
If your software release is version 16.4 or lower, do not run *:UPDATENT with the clincal data CD dated 4/3/02. Instead run the automated updates to update clinical data if you are a subscriber to this service.

To access:

1. Type RX at the Application Name Screen; press ENTER. Press ENTER at the Auto Verification Screen.
2. Type your store ID number and sign on ID (if an Enterprise system); press ENTER.
3. Type D, File Maintenance; press ENTER.
4. Type your Security Access Code; press ENTER.
5. Type H, Update Drug Clinical Data from CD-Rom; press ENTER.
6. Type E, Automated Updates; press ENTER.

Once you press ENTER the update begins. There are no options to complete.

The following files must contain 5 or more records before converting to 17.1: Patient Non-Drug Order, Inventory, RxAudit. If these files have 0 records, 0% full, enter at least 5 records in each of these files.

SIGS & HOA'S - 17.1 & 17.2
A change has been made to link HOA codes to Sigs when the sig changes on a prescription. Call the Support Center for updated programs if you experience problems when adding or changing HOA'S.

If a prescription is discontinued or reassigned, the HOA and FREQ on the reassigned prescription will remain until a change is made to those fields. If the SIG is changed on the prescription, the system will pull the default HOA on the SIG record with the frequency that corresponds with it to the prescription. The HOA or FREQ can be changed on the prescription as needed.

Hardware Support:
When you call QS/1 for Hardware Support, it may seem like the technician is speaking an unfamiliar technical language. Labeling the computer equipment in your pharmacy will help you assist the QS/1 technician. This way, we can find and work with the correct piece of equipment in a minimal amount of time.

We will often ask you to locate your UPS (battery backup unit), your tape drive, external hard drive, DVD-RAM, modem, hub, switch or router. After you've labeled the equipment, make a diagram of your computer network. Keep the map in a safe place. Make sure your employees are familiar with it, in the event you are out and they encounter a problem. As systems become more advanced, it is important to have a basic knowledge of your equipment.

SystemOne:
17.2 enhancements include a security access feature for all systems to use the hard drive for file Backup/Clear/Reload (in file maintenance). The flag is updated in the main program for each system and then passed through Global Common. If there is no access, the system will not prompt with the question to use hard drive and will assume a diskette backup is being done. If the user does have access and chooses not to use the hard drive, the system will assume they are intending to do a file backup to diskette. If the user chooses to use the hard drive, the system will prompt for a path to the drive/directory they want to use. The file name will be hard coded and in the format of xxxxxxx.BK1. The xxxxxxx will represent the QS/1 file name, for example: MTDFILE.BK1.

POS:
Payroll is one of the highest controllable expenses in your store. In release 17.1 and later, POS has a time clock feature, to track the hours employees work. This new feature is located in the Daily Operations section of your POS system.

CRx:
The IVR mail queue has been modified to allow manual entries. This feature is useful when pharmacy staff take a refill over the phone but do not want to fill the prescription at that particular time. An IVR interface is not required when making manual entries into the mail queue. To set up your system to use the mail queue, from the main menu (7.4.1) change #14 IVR Setup to Y.

IN YOUR AREA

Training Seminars

West Coast Region

San Leandro, CA: (866) 848-1942
08/13/2002 RxCare Plus: Drug Inventory
09/10/2002 SystemOne Basic Overview
10/08/2002 Managing California Medi-Cal with QS/1
11/12/2002 RxCare Plus: Disease Management

Mid-Atlantic Region

Indianapolis, IN: (800) 637-5251
07/25/2002 CRx: Basic Overview

***Rx Training**
08/20-21/2002 RxCare Plus: Introductory Setup & Training

Lexington, KY: (866) 441-7011
07/23/2002 SystemOne: Basic Overview
09/19/2002 RxCare Plus: Enhancements Review

Richmond, VA: (877) 392-5851
***Rx Training**
07/23-24/2002 RxCare Plus: Introductory Setup & Training

Southeast Region

Spartanburg, SC: (800) 889-9183
08/13/2002 SystemOne: Enhancements Review
09/17/2002 RxCare Plus: Enhancements Review
10/15/2002 RxCare Plus: Accounts Receivable
11/19/2002 RxCare Plus: Enhancements Review

Orlando, FL: (800) 889-9183
09/17/2002 RxCare Plus: Enhancements Review

Miami, FL: (800) 889-9183
11/19/2002 RxCare Plus: Enhancements Review

Northeast Region

Sturbridge, MA: (800) 648-7428
06/19/2002 Point-of-Sale: Basic Operations
08/21/2002 CRx: Pharmacy Basic Processing

Mechanicsburg, PA: (717) 795-2700
07/17/2002 RxCare Plus: Enhancements Review
09/18/2002 PrimeCare: Basic Processing

* Rx Training (These are two-day courses with detailed information that will start you out on the RxCare Plus product. The $500.00 fee per attendee includes two nights' lodging and lunch each day.)

Trade Shows

7/11-7/15 Seattle, WA
RBC Cardinal Show

7/12-7/13 Florence, KY
Kentucky Pharmacist Association

7/18-7/21 Biloxi, MS
Louisiana Pharmacist Association

7/22-7/26 Orange Beach, AL
Tennessee Pharmacist Association

8/4-8/7 Virginia Beach, VA
Virginia Pharmacist Association

8/4-8/6 Lake Lanier Island, GA
GAMES

8/4-8/7 Sandestin, FL
Southeast Gatherin'

8/10-8/14 San Diego, CA
NACDS Pharmacist and Tech Conference

9/12-9/14 Milwaukee, WI
Pharmacy Society of WI Convention

9/19-9/22 Lawrence, KS
Kansas Pharmacy Association

9/20-9/22 St. Louis, MO
Illinois Pharmacist Association

9/25-9/27 Las Vegas, NV
FMI Western Food Expo

9/27-9/29 Sacramento, CA
CPhA Western Ed Faire

10/9-10/11 Greensboro, NC
North Carolina Pharmacist Association

10/10 Redondo Beach, CA
Barnes Wholesale

10/19-10/23 Nashville, TN
2002: NCPA

10/29-10/31 Atlanta, GA
2002: MedTrade East

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

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