

# INSIGHT

October 2003

THE QS/I MAGAZINE

# 17.8

Broadening  
Your  
World



[www.qs1.com](http://www.qs1.com)

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In this issue of Insight we are focusing on you, our customers. Our goal is to provide the best customer service (p. 12) and technological advances in our 17.8 software release (p. 14). Our commitment to staying on the cutting edge of technology has never been stronger. The central focus of our business is you. We want to affirm in this issue that the improvements we are making to our products and services are aimed specifically to better serve our client base. Just as we implemented WebConnect to meet the need of PrimeCare customers to communicate between the facility and the pharmacy, we want to continue to offer products and services that fulfill your everyday needs. We are aware that even the most advanced software system is no replacement for genuine customer care.

Our most important responsibility as QS/1 employees is customer service. Great customer service means satisfied customers. It is the job of employees in every part of the company, whether we work with invoices, hardware, training, marketing, programming, support, shipping, etc. Everyone at QS/1 is responsible for customer satisfaction.

In this issue we are spotlighting Leonard Edloe of Edloe's Professional Pharmacy in Richmond, Virginia, who exemplifies the care and concern for his customers that we desire to show you (p. 7). We are including an article by HME industry expert Rhonda Rawl regarding customer loyalty and striving to go beyond your customers' needs (p. 5). And we are including pictures from our annual customer conference in San Diego (p. 22). Our staff truly enjoys the opportunity to interact with you, and it was a pleasure to meet so many of you there. We believe that the conferences are an excellent forum for us to get to know you and learn more about your businesses and your needs.

The bottom line is that many can produce a good system, but the one thing that can set us apart from other vendors is to have the best customer service and support. We at QS/1 value the relationship we have with you and pledge to deliver quality products, services and support.

**Tammy Devine**

Vice President for Marketing, QS/1

October 2003

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# What's New HIPAA

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## HIPAA Security Rules: Administrative Safeguards

In the July issue of *Insight*, we introduced the final HIPAA security rules. We explained the purpose of the security rules and presented an overview of implementation specifications and the three types of safeguards: administrative, physical and technical. In this issue, we discuss the administrative safeguards in more detail.

The administrative safeguards require covered entities to implement policies and procedures to prevent, detect, contain and correct security violations. The first set of safeguards are known as the security management process. There are four pieces to this process, and they are all required.

The first is a risk analysis to determine potential risks to the confidentiality and integrity of electronic protected health information (e-PHI). In conjunction with a risk analysis is risk management, which requires implementing security measures to reduce those risks.

Another requirement is a sanction policy. If an employee of the covered entity fails to comply with any of the security measures, appropriate sanctions must be taken. The last piece of the security management process is an information systems activity review. This requires a covered entity to review system activity such as audit or security logs.

As with the privacy regulations, an officer responsible for the development and implementation of the security rules must be appointed. A covered entity with a sufficient IT staff should consider having someone from IT be the security officer. The appointment of a security officer is required.

Workforce security is another part of the administrative safeguards. This part is addressable, meaning that alternative measures can be implemented if they are reasonable and appropriate. The first of the three pieces of workforce security is to establish procedures for the authorization or supervision of employees who work with e-PHI. The next is workforce clearance procedures, which ensures that an employee's access to e-PHI is appropriate. Finally, termination procedures should be put in place to ensure a former employee cannot obtain any e-PHI once employment is terminated.

Training is an element of the security rules, just as it was with the privacy rules. Periodic updates for employees of the security standards and of the covered entity's security procedures should supplement an initial training program.

This training is part of the security and awareness training piece of the administrative safeguards, which also includes procedures for protection against malicious software (such as a virus), log-in monitoring and password procedures. All of these items are addressable.

A required element is security incident procedures. This element includes both identifying and responding to cases of security incidents, including documenting the incident and the outcome.

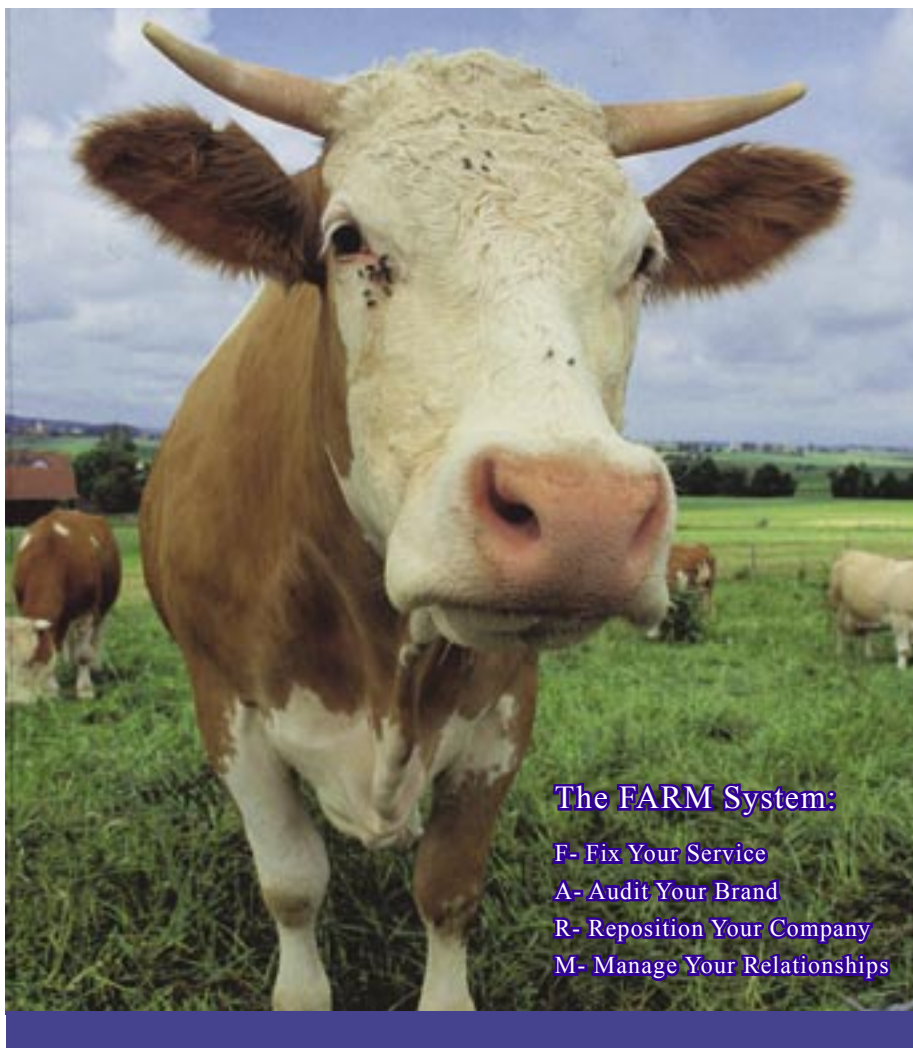
Contingency plans are another piece of the puzzle. This piece can best be described as disaster planning. A required piece to these contingency plans is the data backup plan. Procedures need to be put into place to be able to make exact copies of e-PHI. Along with this is the disaster recovery plan to restore the data from the data backup plan. This plan is required as is the emergency mode operation plan, which includes procedures to deal with accessing data in an emergency situation. Testing and revision procedures of these plans are addressable, along with an analysis of the relative criticality of specific applications and data in support of the contingency plans.

The final required piece worth noting is a business associate agreement. If you had business associate agreements signed before the security rules were finalized and elements of the security rules were not taken into account in the business associate agreement, then new agreements are necessary.

In the January edition of *Insight*, we will take a look at the physical safeguards, and in April we will take a look at the technical safeguards. April 21, 2005, is the deadline for compliance with the HIPAA security rules, so there is still time to get a good understanding of the rules and how they affect your organization.

By: Rich Muller  
Industry Analyst Manager, QS/I





### The FARM System:

F- Fix Your Service

A- Audit Your Brand

R- Reposition Your Company

M- Manage Your Relationships

## The Laws of the FARM

### Customer Loyalty

By: Rhonda Rawl  
President, RKR Marketing, LLC

Rhonda Rawl, a speaker at the 2003 QS/1 Customer Conference, shares tips for Managing Your Relationships with customers, the M in her FARM system.

A friend recently told me about the Ritz Carlton and how they do not strive for customer satisfaction -- they strive for something even better -- customer loyalty.

Why would the Ritz Carlton not want to strive solely for customer satisfaction? The fallacy of customer satisfaction is that it is a reactive response to customer needs. When a customer uses a product or service or has a problem with that product or service, achieving good customer service consists of the company trying to remedy that problem as quickly as possible. However, in most cases, even

good customer service is not reached. Customer loyalty, however, is a proactive response to customer needs. Customer loyalty involves a company taking steps to ensure that the least amount of problems occur. And, of course, when they do occur, excellent (not just good) customer service is achieved.

So, how does the Ritz Carlton achieve customer loyalty? Guests of the hotel do not "stay" at the Ritz Carlton; they "experience" the Ritz Carlton. For example, if you were a guest at the Ritz Carlton, the entire staff would be briefed on your name and would

refer to you by name during your visit. When you returned in the future, they would know your name immediately upon arrival.

Have you ever reorganized your hotel room to better suit your tastes, such as moved the coffee pot, took the bedspread off of your bed? At the Ritz Carlton, after you stay once, they note in your guest profile the changes you made to your room so that the next time you visit, your room will already be set up specifically for you. Your profile would contain other likes and dislikes to be used for future visits.

The Ritz Carlton does something most companies do not do -- they empower all of their employees to make decisions regarding a problem that a guest may be having. That means, if you are a guest you can tell any person on the staff at a Ritz Carlton, even if the problem does not involve their job description, and that person is empowered and expected to solve your problem immediately. Therefore, the buck does not get passed to someone else.

In your business, how can you achieve not just good customer service, but customer loyalty? To achieve this type of customer loyalty, a company must take a proactive stance with the service that they provide. Keep a database of all clients. When you come in contact with them, note their likes and dislikes, note their birthday, anniversary, the name of their spouse and so forth. Also note the manner in which they prefer to communicate. Some people simply prefer to communicate the old-fashioned way -- face to face. With the advent of technology, many people want their customers to communicate via the e-mail or to buy their product over the Internet. However, some people prefer other methods. Give your customers options for the manner in which they prefer to communicate with you, not the way in which you prefer to communicate with them.

The other key to achieving customer loyalty is with your employees. Plan a brainstorming session with everyone within the company to invent ways to achieve customer loyalty. To achieve the "buy-in" from employees, make it their idea and then give them the task of executing their ideas.

# Management Tips:

## Selecting Top Talent

Recently a friend who runs a small business stated that it was difficult to find even average candidates who would show up for work each day. He admitted that he had given up on finding talented candidates when he needed a new employee.

My friend's frustration is easy to understand, but the payback from finding top-talent employees makes the extra effort worthwhile because these are employees who can help you grow your business. You just do not find many successful companies who hire mediocre employees.

The first step in selecting top talent candidates is to learn to interview and to trust your impressions of the candidate. There are some very good selection tools on the market, and many of them can help you select candidates; but the most trustworthy predictor of future success on the job is your own impression of the person. So much of success on a job is a factor of fitting in with the organization's culture. Sometimes the most qualified person you can find just will not fit in with the rest of your workforce and the way you run your business. Your job is to find the most qualified person who will succeed in your organization's work culture.

When you are looking for top-talent employees, the first indicator is past experience. But beware. Do not rely on previous experience as your only criteria. While a good, stable work history with experience relevant to your job opening may be an excellent indicator that the candidate has the "right stuff," it is not always a predictor of the applicant's initiative to take on extra duties and responsibilities. Work history also is not necessarily an indicator of an applicant who will grow and change as your business grows and changes.

To identify the top-talent candidates, look much deeper than past work history. An in-depth interview with the candidate, where you ask in-depth questions, will help you identify the best candidates. Some of the characteristics of a top talent candidate to note:

### Eager to learn.

Talk with the candidate about books he has read. Ask the candidate to tell you what he learned in his previous



jobs. Let him explain to you what he has done to learn new tasks. Ask about training courses the candidate might have attended. Ask the candidate about things he would like to learn while working for you.

### Knows strengths and weaknesses.

Most top talent candidates have a clear understanding of their strengths and weaknesses. However, just asking someone to tell you about her strengths and

weaknesses might not result in an honest response. Instead have candidate tell you what she has done to improve her ability to do her job. Ask the candidate to tell you about the last time she was criticized about her work.

### Willing to take a risk.

We don't need reckless employees, but employees who are willing to take a risk will be able to handle assignments without your constant attention sooner than the employee who is constantly concerned with making a mistake. Ask the candidate to tell you about situations where he had to work independently. Ask the candidate to talk about his experience working on new tasks.

### Adapts to changing work demands.

One thing is certain. Your business will change, and you need employees who can change too. Ask the candidate to give you examples of how things have changed in previous jobs and how she has reacted.

### Works well with others.

Everyone is talking about teams today, and many companies are achieving success by arranging employees into work teams; but for most companies the real need is for employees to get along with each other. Pettiness, gossiping and establishing work cliques is damaging to any work environment. Put the applicant on the spot by asking him to tell you about the most difficult coworker he has ever worked with and how he dealt with the situation.

The bottom line? To find quality, top-talent employees, change your interviewing focus from past experience to an investigation into the characteristics you need for your business.

By: Bill Roberts  
Information Resources Manager, QS/I





By: Kathryn Hix  
Communications Specialist, QS/1

# Customer Spotlight

## Edloe's Pharmacy

Richmond, V.A.

A man of many callings, Leonard Edloe, Pharm.D., M. Div., is a strong influence in the city of Richmond, Virginia, and surrounding areas. Edloe is the owner of Edloe's Professional Pharmacy, Professional Pharmacy South and East End Community Pharmacy; he also is partner in a third Richmond-area Professional Pharmacy. On the weekends Edloe spends his time as pastor of Antioch Baptist Church in nearby Matthews County.

Edloe got his start in the pharmacy in 1970, joining the Edloe's Professional Pharmacy business his father began in 1945. In 1974 Edloe moved the business to its current location. Edloe is proud of the influence of his pharmacy on its community and is pleased that it, rather than national chain stores, is the only successful pharmacy in the area. He believes that the consistency of the business and the success his family has enjoyed is an inspiration for a community without many other sources of inspiration.

"A lot of communities can be served. We just need to encourage young people to do it," says Edloe as he tells the story of his orphaned father from Stanton, Virginia, moving out of his hometown at age 12 after an altercation with a fellow student.

Edloe is a firm believer in the power of individuals' contributions to their fellow citizens. Edloe himself has been a civic leader and a member of "every volunteer group in town." He also is a faculty member at Virginia Commonwealth University's Medical College of Virginia, Howard University and Hampton University.

"It all ties in because it's about helping people. A lot of pharmacists miss out by not being involved in the community," he says.

With the philosophy of service in mind, Edloe sees his two professions as "blending." He says that the ministry and the pharmacy have a great similarity, "It's all about faith and belief" -- people must have faith and belief for religion and for medicine; neither can be effective without those two crucial elements.

"People are sick because they have given up. They need something to believe in to get better. It is more than the pills that gets you well," Edloe says.

Therefore he tries to dispense a dose of care and concern along with the prescriptions he fills. Edloe considers it his ministry away from the church. In return he takes his knowledge of medicine to churches and hosts a counseling program to change bad habits and encourage lifelong health. Participants are encouraged to bring their prescription bottles and engage in discussions with Edloe regarding their general health and their drug regimen.

Edloe speaks proudly of his latest accomplishment, his doctor of pharmacy degree he received from the University of Florida during the summer of this year. He displays a nameplate on the pharmacy counter given to him by one of his pharmacists. It reads simply, "Leonard Edloe, Pharm.D."

Edloe also is proud of his store and his service to his customers. He says the prescriptions business carries the entire store, but it is the convenience for people in the neighborhood to do some one-stop shopping that makes the front-end sales worthwhile.

In 1988 Edloe began using CRx products in his pharmacy. Today he is a satisfied QS/1 customer with RxCare Plus, SystemOne and Point-of-Sale software. He uses the networking feature to connect his multiple locations and loves the Internet refill capabilities. Edloe says that the "ability for refills to be processed almost instantaneously" is most helpful to his customers.

"People want to be served promptly," he says, "and QS/1 helps me do that."

Edloe wants to look at other QS/1 services. He says he knows he needs to move towards an IVR system. And a robot is on his short list of needs.

QS/1 customer since: Began in 1988 with CRx.

QS/1 systems: RxCare Plus, SystemOne and Point-of-Sale

Leonard Edloe's favorite features: "The Internet refill capability is a God-send."



Leonard Edloe, RPh, pictured with Shantelle Lewis, recent hire and graduate of Howard University.

# NCPDP Update

By: Scott Rizzitano, Technical Support Specialist, QS/1 & Jay Williams, Sales Manager, QS/1

NCPDP is creating two new versions of regulations: NCPDP 5.1 and NCPDP 1.1 batch. The 5.1 transmission is a new HIPAA format while the 1.1 batch transmission is a Medicare regulation.

## NCPDP 5.1

QS/1 currently is transmitting the 5.1 format to all third parties that, at this time, are able to accept the new format. Only 41% of our third party plans can accept in version 5.1. Most third parties will accept 5.1 billing by October 16, 2003. QS/1 will activate third parties' transmission once the third parties' testing of 5.1 claims are complete.

There are a few steps RxCare Plus and PrimeCare customers must take to ensure NCPDP 5.1 compliance. First, to transmit, your software release must be 16.4 or higher. Second, your PowerLine carrier code must have transmission program QS5 (analog) or QSI5 (Internet) to transmit claims in the 5.1 format. Because Release 16.4 does not accept coupons or partial refills and only can respond to two DURs, anyone who is at or below Release 16.4 needs to convert to Release 17.6 as soon as possible. Additionally QS/1 is encouraging any customer on a 17.x release to update to Release 17.6, which provides all functions necessary to meet NCPDP requirements.

For CRx customers, your software must be Release 6.3 or higher, but QS/1 recommends being on Release 17.7 for the latest program changes. Your transmissions format for each third party needs to be set to a 5.1 format. Any new changes or requirements by NCPDP will be made only to the current releases.

## NCPDP 1.1 Batch

The NCPDP 1.1 batch to be used by all retail pharmacies providing Medicare-covered medications to patients is available through SystemOne. This standard includes nebulizer medications, oral cancer drugs and immunosuppressive drugs for transplant patients. You must send these items via the new NCPDP 1.1 batch format, and you will be unable to send them via the new ANSI X12 4010A1 837 format. Unlike NCPDP 5.1 that is adjudicated almost instantly online, the new NCPDP 1.1 batch format will be created and transmitted to the DMERCs. You can receive an accepted and rejected report the next day, with final payment arriving 15 days after the report.

The deadline to start sending claims via NCPDP 1.1 batch format is October 16, 2003. The best solution to generate and send these NCPDP 1.1 batch formatted claims and the associated Medicare/DMERC required documentation is SystemOne. The DMERC's newly updated "free software" also will not be able to generate or send this NCPDP 1.1 batch format.

The electronic version of the EOB (Explanation Of Benefits) called ERN (Electronic Remittance Notice) will return in the standard ANSI X12 4010A1 835 format.



## FamilyCare Back On-Line

As the primary means for communication and publication in the corporate sector moves from a paper form to the Internet, FamilyCare is following suit. The acquisition of CornerDrugstore.com and the technological advances in the Internet industry provided FamilyCare a new web site in September 2003: [www.familycarepharmacies.com](http://www.familycarepharmacies.com). With customer support being our primary focus here at QS/1, what

better way to provide additional information and resources to our customers than the Internet? With 60%-70% of all QS/1 customers moving to or utilizing Internet claims adjudication and other Internet-related services, the timing seems right for FamilyCare to offer part of our service on-line. The web page is designed around the needs of our FamilyCare members, offering such information as third party setup and contact information, member benefits, news topics related to the third party industry, frequently asked questions and answers from other network members and more. The bottom line for the development of this page is to offer you, the member, a functional and helpful web page as an alternate means of information. Our new FamilyCare web page also functions as the portal for future opportunities in our member service area. Our FamilyCare staff will continue to provide quality phone support and answer any questions you may have, so continue to call on us for all of your pharmacy network needs.

## Pharmacy First - Positioning Pharmacists as Compliance Gatekeepers

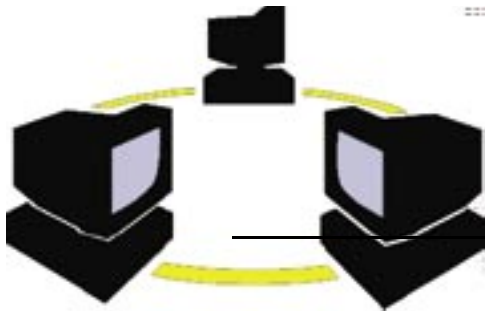
With over 2,200 pharmacies participating in 44 states, Pharmacy First is now the largest network of independent retail and regional chain pharmacies in the country. The network gained national prominence by providing retail pharmacies with unequalled access to manufacturer contracting opportunities, with pharmacy members currently earning average program revenues of \$2,400.00 to \$4,000.00 annually. Currently QS/1 has more than 530 pharmacies participating in the Pharmacy First program and is seeing results. The earnings from this program can be seen as increasing the bottom line or as a reduction in claims switching cost; either way it is a great opportunity to bring additional revenue into the pharmacy.

One reason for the network's success has been a shift away from market share rebate contracts toward compliance-based programs. Traditional market share programs require pharmacists to earn rebates by dispensing one product in favor of another competing brand, often resulting in the difficult task of initiating a therapeutic interchange. With the help of pharmacy systems like QS/1, Pharmacy First recognized that retail pharmacists are well positioned to assist patients in remaining refill compliance.

The network's compliance programs cover top-selling brand name drugs within chronic care categories such as arthritis, asthma, cholesterol and diabetes. Once a product is listed on the network's formulary, pharmacies have the opportunity to earn significant revenues by targeting non-compliant patients who have refills remaining and initiating an intervention. Compliance program performance is measured by dispensing data automatically sent through the network, eliminating the need for pharmacies to submit any paperwork or claim forms for reimbursement.

All network programs operate within HIPAA privacy guidelines, and members maintain ownership and control over their dispensing data. There are never any wholesaler-directed purchasing requirements to participate. For more information please call FamilyCare Support at 1.800.428.7271 or visit the Pharmacy First web site at [www.pharmacyfirst.com](http://www.pharmacyfirst.com).

By: Randy Burnett  
Network Industry Coordinator, QS/1



# WebConnect

By: Jim Hancock, Sales Manager, QS/1

WebConnect is a new product to expand the function of QS/1's PrimeCare software product. It provides a tool to enhance communications between the nursing facility and the pharmacy.



## History

QS/1 has received requests to provide software that would allow the nursing facility access to the pharmacy data. The nursing facility needed access to patient data including the active medication profile, drug information, reports and ancillary orders. Other requests included refill ordering and new order processing.



## How it came to be

A number of factors came together in late 2002 and 2003 to make WebConnect a reality. The systems programming group, the applications programming group and the web programming group along with marketing and product services collaborated and devised a plan to address the need for web services. Another factor that favored the development of WebConnect now is the widespread availability of high speed Internet access.



## Types of Installation

There are two types of installations, intrANet and IntERnet. For intrANet, if there is no need for access outside of your local area network (i.e. your nursing facilities are on the same network as the pharmacy and do not need the internet for access) WebConnect can be installed so that it works on the local intrANet. IntERnet installation uses the Internet to link your pharmacy to the WebConnect hosting servers at QS/1 and uses the Internet to link your facilities to the WebConnect servers at QS/1. A 56k dial-up link to the Internet is a minimum requirement. DSL or other faster alternatives are highly recommended for better performance.



## Functions

QS/1 FFFFO      QS/1 DATA SYSTEMS      Date: 08/19/03  
Rel 17.8      P.O. BOX 6052      (Tuesday)

Function...      Facility/Unit Password Setup For System

Login.....BOB      User Name.....BOB DAVIS      Inits...RND  
Password...8881122AA      Facility/Unit...0      OLD FOLK'S NURSING HOME

Patient Access:	Patient View.....Y	Patient Add.....Y
	Patient Update.....Y	Profile View.....Y
	View Ancillary Orders...Y	Update Ancillary Orders...Y
	View Patient Monograph...Y	Print Patient Monograph...Y
	Check Interactions.....Y	
Print Functions:	Physician Order Forms...Y	Medical Admin Records...Y
	Psychotropics.....Y	Other Reports.....Y
Rx Orders:	Process Refills.....Y	New Order Entry.....Y
Clinical Access:	Drug-Drug Interactions...Y	Drug Monographs.....Y
	Drug Precautions.....Y	Drug Counseling.....Y

The user interface is designed to work with an Internet browser. QS/1 supports Microsoft Internet Explorer 5.5 and above. We have designed the nursing home side of the system assuming a minimum amount of computer literacy and the ability to use a mouse and a browser. All of the look-up functions use alpha search functions so there are no QS/1 codes to learn.

Another important issue is security. The pharmacy manager sets up and manages the WebConnect user access. Group level security is incorporated, and each module of the system can be set up with different levels of access.

- Nurses can
  - search, add and edit patients,
  - view profiles,
  - add and delete ancillary order information,
  - order new meds,
  - request refills and more directly from the facility
- Eliminate faxed requests to the pharmacy with online refill ordering
- Refill orders directly enter the pharmacy's filling queue
- Print reports and charts, including Physician Order Forms and MARs
- Provide access to web-based medical references and health content

Within PrimeCare, most of the incoming data is managed using the Tickler file. Refills are processed very much like IVR. The new order functions use the standard QS/1 electronic prescription processing and also are managed using the Tickler file.



## Sample Screens

Main Web Page



Medication Profile



Patient Search and Result

# A Commitment to Service...

By: Mike Ziegler, Customer Support Supervisor, QS/1

## Support Center Facts

100 Trained Technicians

Open 363 Days/ Year

2 Help Desks: Located in Richmond, VA and  
Spartanburg, SC

E-Mail and Internet Support Options





# QS/1 Customer Support

QS/1 Customer Support is committed to meeting and exceeding the needs of our customers.

As a leading developer of software solutions for the healthcare market QS/1 continually is looking for ways to better understand our customer satisfaction levels and make improvements.

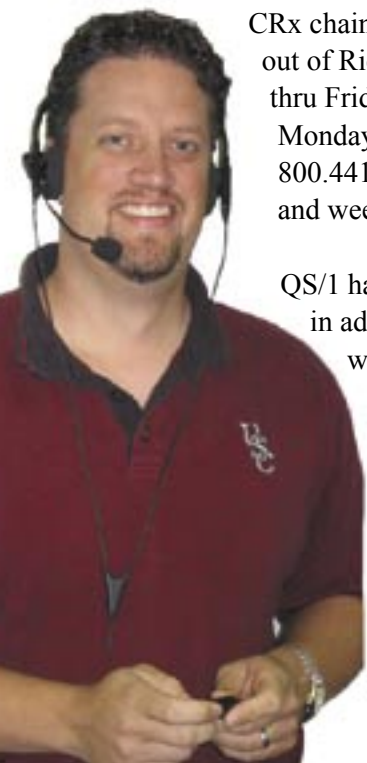
We routinely perform stringent reviews of our customer service and support department. This review is broken down into approximately 100 major service factors, including customer relationship management, customer feedback, corporate commitment and strategic direction and performance metrics.

QS/1 is committed to delivering the highest level of service to our customers and actively is engaged in improving the systems, processes and procedures used within our Support Center.

Chris Cox, QS/1's Director of Product Support, noted that the company's support group has made a strong commitment to providing the best in customer service.

"By meeting and exceeding requirements, QS/1 will continue to see increased performance and ever-improving customer satisfaction ratings," Cox said. "Delivering world-class customer support is a critical component of QS/1's strategy. Our support staff has the goal of making customers operate at peak performance."

QS/1 Customer Support Department, located in Spartanburg, is open 363 days a year, closing only for Christmas Day and Thanksgiving Day. We staff our support lines 14 hours per day, five days per week as well as eight hours on Saturday and Sunday. These hours of operation are designed to meet the needs of our customers.



CRx chain product provides 24 hour support and is based out of Richmond, VA. Hours of operation are Monday thru Friday 8am to 5pm: phone number 800.879.1987; Monday thru Friday 5pm to 10pm: phone number 800.441.1995. Call either phone number after 10:00pm and weekends.

QS/1 has introduced email and Internet support options in addition to our standard telephone support. Our website provides useful information in a question and answer format. The website address is [www.qs1.com](http://www.qs1.com). Sign in then choose the option "Ask Us" to post a question on the Internet.

When you need help or when you just have a question about QS/1, its products or services, please use the most convenient method available to contact us. Our goal is to make sure that we meet and exceed your expectations each and every time.

To reach our trained  
**Support Staff:**  
Spartanburg, SC  
1.800.845.7558

Hardware	ext. 250
Pharmacy	ext. 460
POS	ext. 203
PowerLine	ext. 260
Price Updates	ext. 355
SystemOne	ext. 240

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Richmond, VA  
1.800.879.1987 (8am - 5pm)  
1.800.441.1995 (5pm - 10pm)

# Broadening

# 17.8

Release 17.8 delivers to you, the customer, the latest enhancements for all QS/1 software products:  
improving workflow  
increasing ease of use &  
incorporating the latest industry tools

# Your World

## RxCare Plus

QS/1 always is working to simplify pharmacies' daily tasks and routines. Workflow was a huge step in that direction, and now our latest release delivers several new options for streamlining your practice. Release 17.8 introduces two new modules from First DataBank: the Drug Allergy Module and the Prioritized Label Warning Module.

Additionally, QS/1 is delivering new scanning capabilities and a batch prescription processing option.

## New Scanning Capabilities

In Release 17.2 was the ability to scan a paper prescription when entering it into the system and later retrieving that prescription for review when refilling or in the quality assurance step of Workflow. With Release 17.8 we will introduce two new scanning capabilities. Scan an image into an existing prescription and scan a prescription that has been discontinued and reassigned.

### Drug Allergy Module

The Drug Allergy Module replaces the current allergy module. Perhaps the greatest advantage of this new module is the ability to look up allergies by name rather than by code. A list of allergy descriptions will include allergens, ingredients and medical names (brand and generic names) for the different allergies. Choose an allergy by name without knowing an allergy code. There only will be allergy descriptions. The Patient Cross Sensitivity feature has been added to the Clinical Checking Options in the Pharmacy options section of Store Information to cross check sensitivity on a patient. Example: Patient is allergic to penicillin. The system checks cross sensitivity when filling for Keflex and alerts you to the allergy.

### Prioritized Label Warning Module

The new Prioritized Label Warning Module from First DataBank creates label warnings for the standard, Intercon and Architext label warnings. The Prioritized Warnings field contains the warning label codes available from First DataBank and are listed in a priority assigned by First DataBank. A drug may have up to ten prioritized label warnings. The Customized Warnings field has the option to customize the codes either by choosing the priority from First DataBank or by creating your own priority list. Three warnings can be stored. Type the label of highest priority in the first field, the second in the second field, etc., because warnings print in this order. Note: These settings will not be changed by clinical updates.

### Batch Prescription Processing

Release 17.6 introduced batch prescriptions using Workflow. In Release 17.8, this capability is available from normal Prescription Processing:

A new function, (B) Batch Function, is available on the prescription processing screen. This function combines a group of prescriptions in a batch:

New batch: The system assigns a batch number or you can use a customer-defined batch number.

Old batch: The last batch used.

Cancel batch: Type "Y" to cancel batch.

Rx Quantity: Type the number of prescriptions for the batch.

Rx Remaining: The number of prescriptions remaining in the batch.

Priority: Create a priority list of up to five priority methods (example: Delivery).

New function: (N) New Batch field appears on the batch window. The field displays a window for creating a new batch by typing the prescription number or transaction number or by scanning the barcoded prescription number or the barcoded transaction number.

## Canadian Enhancements

It now is possible to perform DIN Verification in Prescription Processing and Quality Assurance check in Workflow. After creating a drug record, access the UPC number field and scan in the UPC number from the stock bottle. Press F1 to save. When you access the DIN Verification window or the prescriptions from the quality assurance queue, you can scan the UPC number on the stock bottle in order to verify that you are dispensing the right DIN number.

## PrimeCare

There are a number of helpful new features in Release 17.8 for PrimeCare. The following highlights improved UPC Scanning and a new Consolidated Delivery Sheet for Workflow. This section also previews the more flexible Patient and Facility Billing Matrix for A/R. There are smaller additions and updates listed in the What's New section of your 17.8 CD. Please refer to the RxCare Plus section of this article for a discussion of the new allergy module.

### UPC Scanning

The scanning of UPC bar codes has been improved. Many over-the-counter items have UPC bar codes instead of NDC bar codes. This fact made it difficult to use a product bar code to scan over-the-counter items consistently in the Quality Assurance step of workflow. Currently when you scan an UPC from an over-the-counter item, you get

the workflow file rather than the transaction file or the fill list file. By using the Delivery function in Workflow, a flag is set that indicates that the order has been processed (preferably with bar code scanning) for delivery. The new report uses the same sort and print options as the existing Delivery Sheet reports. For pharmacies that process bulk items and fill list items, this new report provides the ability to print one delivery sheet that covers both types of dispensing instead of having to run a report from the transaction file and another report from the fill list file. Additionally, an Exception Report has been added as a print option. This report lists those items that are still in the Workflow queue but have not been processed for delivery. The report shows the current status of an outstanding order in the queue.

### Patient and Facility Billing Matrix

Watch the January 2004 issue of Insight for more detail on a number of Release 17.8 enhancements for the accounts receivable and billing functions in PrimeCare. The patient billing matrix has been redesigned and is much more functional and flexible. It provides the ability to have concurrent coverage dates rather than the current matrix's consecutive dates. Another major new feature is a Facility Billing Matrix, a table that defines payors (price codes, charge account codes and coverage exclusions and exceptions) at the facility level. It has the ability to cascade from one payor to the next based on the rules built on the payor. Example: Payors could be prescription private pay

a mismatch because the system is attempting to match the UPC to the NDC in the drug file. With 17.8, after scanning the bar code the system attempts to match the NDC; if no match is found on NDC, the system automatically attempts to match the UPC. If there is no match, an error message displays; otherwise the scan is accepted and you proceed to the next order in the queue.

### Consolidated Delivery Sheet from Workflow

Release 17.8 includes a new Delivery Sheet. It is called the Consolidated Delivery Sheet from Workflow. As the name suggests, this new Delivery Sheet uses data from

and over-the-counter private pay. Rules can be built on each of those payors to cause over-the-counter items to cascade to the proper price code and charge account code. The goal is to build the pricing and billing rules at the facility level and streamline order entry. Another feature included in the new release is the ability to use invoice numbers and print invoices for statements.

### Point-of-Sale

Release 17.8 includes useful new features for Point-of-Sale. There are several changes and additions since the last issue of Insight, the most significant being the Windows Client



for both the IBM 4694 and the Cash Drawer Solution (CDS) registers. The Windows Client offers numerous features such as additional systems running concurrently on a register and the ability to “toggle” between systems. Upgrading to the Windows Client requires a “Windows

control tools and strategies, Visa U. S. A., Inc. Operating Regulations prohibit the retention and storage of this data. Visa has created several documents to assist you in understanding this rule and other data protection requirements. Fines are in place for the responsible Acquirer where such a breach may occur.”

processor” for each register and may require a hardware upgrade. Contact QS/1 Marketing Upgrades at 1.800.845.7558 ext. 155 for information on upgrading your hardware to take advantage of the Windows benefits.

### Shipping Information

A new window, Shipping Information, appears after a transaction is tendered if the Tracking Number option in the Control File is set to Yes and a prescription was included within the transaction. This window requests information necessary to allow the prescriptions, along with other merchandise contained within the transaction, to be shipped via Federal Express, UPS or the U.S. Postal Service using preprinted tracking numbers.

### Batch Prescription Processing

RxCare Plus includes a new Batch Function on the prescription processing screen to group prescriptions into a batch. There also is a new label routine to print a bar-coded batch number on your prescription receipt labels. Scan the bar-coded batch number to ring up instantly all of the prescriptions within a batch, eliminating scanning each receipt.

### Credit Card Processing

Visa U. S. A., Inc. prompted numerous changes to the way Point-of-Sale processes credit cards. The following statement was issued by Visa:

“Issuers and Acquirers Are at Risk When Magnetic-Stripe Data is Stored - Data-retention can be a serious issue. Recent events have indicated that, in some cases, full magnetic-stripe data is being stored at various points in the transaction process. Because compromise of full-track magnetic stripe contents negates the effectiveness of Card Verification Value (CVV) and other risk

Master Card, Discover and American Express are following Visa’s lead.

Program changes to comply with these regulations:

1. The Enter Credit Card Numbers program stores only the Expiration Date, Card Holder Name and Account Number as embossed on the card.
2. The size of the Credit Card Expiration Date and the Credit Card Number fields in the Customer Record to store only authorized Visa, Master Card, American Express and Discover data is reduced.
3. The addition of a conversion program removes any data currently stored beyond the actual card number in customer records.

Release 17.8 also includes the following new fields to the Credit Card Payment window for increased security on manual credit card transactions:

1. Card ID Data: Field prompts the cashier to enter either the Visa three-digit CVV number, the Master Card three-digit CVV number or the Discover three-digit CID number (all located on the back of the card in the signature panel) or the American Express four-digit CID number located on the front of the card.
2. Zip Code: Field prompts for the customer’s zip code.
3. Street #/ PO Box: Field prompts for the numeric street address.

Data can be entered or omitted from any or all of these fields, but the more data that can be confirmed, the less

the transaction will cost you, the merchant to submit. The preceding changes are documented for QS/1 Software Release 17.8, but the programs are available in Release 17.2 and later. Any QS/1 Point-of-Sale customers currently on releases 17.1 or earlier strongly are encouraged to upgrade to 17.2 as soon as possible. Once on Release 17.2 or later, contact QS/1 Software Support at 1.800.845.7558 ext. 203 for new programs and instructions to comply with these regulations.

to phone in refills, check the status of prescriptions that were phoned in and attach a voice mail to the refill request. If there are no refills remaining on an IVR refill, the IVR system can fax a doctor's office to request additional refills. For more information please contact the QS/1 marketing support staff at 1.800.845.7558 ext. 175.

#### QS/1 Fax

The QS/1 Fax feature sends refill requests from the

## CRx

Releases 17.7 and 17.8 contain new features to streamline workflow using CRx. CRx is providing their customers with the latest functions that have proven successful with RxCare Plus. These features include Electronic Signature Capture, Signature Log Report, QS/1 IVR, QS/1 Fax and an expanded Spanish SIG.

### Electronic Signature Capture

Using the signature capture device:

- Collect and store the patient's signature for the HIPAA privacy practices acknowledgment statement.
- Collect and store the signature of the individual picking up third party and/or cash prescription(s).
- Determine if the patient requests counseling on the prescriptions being picked up.
- Verify that the patient does not want safety caps if the patient's record indicates Safety cap?...N.

### Signature Log Report

This report prints all prescriptions for a range of dates and the customer's signature on file from when the customer picked up and signed for the prescription(s) from the pharmacy.

### QS/1 IVR

The QS/1 IVR interface offers your customers the ability

pharmacy to doctor offices via a fax modem.

### Spanish SIG

This feature displays the expanded SIG in English or Spanish when dispensing and editing a prescription, depending on the store option.

## SystemOne

The most significant change in SystemOne for Release 17.8 is Pending Orders. This new feature saves transactions without having to post them to the A/R prior to delivery. However, it is important to note that this feature is available only in the new Graphical User Interface (GUI) version of SystemOne.

### Pending Orders for 17.8 GUI Only

Currently, transactions must be logged at the time they are entered in order to print a delivery ticket/invoice, and the serial number that will be provided must be known. Further, inventory levels and both carrier and patient balances are affected. If the patient refuses the product or requires a different item or quantity, the transaction must be voided and the A/R adjusted to maintain an accurate accounts receivable.

Pending Orders creates a saved transaction and permits the printing of CMNs, Physician Orders and other documents at the time the delivery ticket/invoice is printed and enters

the quantity on the transaction in a new field (Committed) on the item record. This new field tracks the quantities committed to patients that have not yet been delivered. The term “log” now refers to a transaction saved and placed in a pending status. Since all transactions must be saved before they can be posted to A/R, it is creating a log of all unposted transactions. Quotes can be created for prior approval. Pended transactions affect only the new Committed field. Likewise, deleting a pended transaction only affects Committed. There is no A/R or inventory history to adjust.

Once the patient returns the delivery ticket, making it a legal document, the transaction can be posted, reducing both the on-hand and Committed amounts by the quantity on the transaction and making the appropriate entries in the various insurance and patient receivables.

Next, once proof of delivery has been received, you must post the transaction. The term “posted” helps to communicate the importance of reviewing the documentation to minimize errors and keep A/R accurate. The signed delivery ticket is a legal document that cannot be altered without obtaining the patient’s signature or initials as per Medicare law. Using this document, verify the information on the transaction and, if correct, post the

It will be possible to track equipment and supply requests, finding those transactions that have not been delivered. In addition, you also will have the ability to enter a transaction today with tomorrow as the date of service. Logging the transaction does not affect the post date of the transaction so that the post date will not be prior to the actual date of service.

QS/1 also is developing reports for undelivered and backordered transactions and transactions with errors. These reports assist in better managing your HME business and catching errors before they get posted. Additional enhancements to Pending Orders will be forthcoming, including the ability to determine what recurring orders are coming due for a particular date range and comparing those quantities with the current available inventory.

Release 17.8 includes great new options for all of the QS/1 software products. Enhanced features and the introduction of new modules, reports, and functions are designed to consolidate your daily routines and simplify your business. Please contact QS/1 at 1.800.845.7558 for more information regarding these enhancements and other great offerings.

transaction. Once the transaction is posted, the price, price code, quantity, item number, serial number, type of sale and assignment cannot be changed. The provider is bound by this signed delivery ticket. Fields that can be changed after posting are carrier, beginning date and ending date, HCPCS and units.

On the occasions when it is necessary to void a posted transaction, the A/R will be reduced by the amount on the transaction, will increase inventory based on the quantity, will correct inventory history for the month the void occurred including year-to-date and will prevent the deletion of the voided transaction. This process is important as we move ever closer to following GAAP (Generally Accepted Accounting Principles). To find out more about GAAP access <http://www.allbusiness.com/articles/content/17954.asp>.

By: Rich Muller, Industry Analyst Manager, QS/1  
 John Frady, Pharmacy Industry Analyst, QS/1  
 Jim Hancock, PrimeCare National Sales Manager, QS/1  
 Pete Peeler, Business Industry Analyst, QS/1  
 Paulette Slaughter, Product Analyst, QS/1  
 Duane Ridenour, Home Health Industry Analyst, QS/1

# CornerDrugstore.com

## Introduces In-Store Kiosks

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The CornerDrugstore Family of Web Products and Services is pleased to announce a new addition to its line of products and services, the in-store kiosk. Current plans call for this product to be available in the first quarter of 2004.

Dedicated to the mission of enhancing the convenient way that customers interact with your pharmacy, the in-store kiosk will provide a measure of self-service which the American consumer has come to expect.

The kiosk will be offered in multiple hardware and software configurations, but regardless of the configuration chosen, the kiosk will represent three important functions: 1) an example of how to use the pharmacy's web site (provided by CornerDrugstore) at home; 2) access to the full featured library of disease and drug information available both at the kiosk and on the pharmacy web site at home and 3) a convenient method of submitting refill requests to the pharmacy dispensing system.

As an add-on product to a consumer web site or web services from CornerDrugstore, the kiosk will feature a custom tour of the pharmacy's web site. This tour along with having the health and prescription refill functionality available at the in-store kiosk will provide the pharmacy with a valuable reference tool for use in the pharmacy while at the same time serving to demonstrate the advantages of the pharmacy-provided web site for their use in other locations. The pharmacy's web site traffic will increase as customers become more familiar with its advantages while being guided at the pharmacy kiosk.

While in the pharmacy a customer may use the kiosk to access disease state information, watch a multimedia presentation on a particular disease or condition, print a drug monograph, visually identify a medication by its physical characteristics, research alternative treatment methods and drug depletions and even submit a prescription for refill.

One of the most convenient features of the kiosks is the prescription refill request capability.

Customers can scan their prescription label or type the information. The kiosk will be networked to the pharmacy's dispensing software system, making the refill





request immediately available to the pharmacist. Once customers are familiar with the process they should automatically gravitate toward the kiosk in the pharmacy. It is a convenience for both parties because it relieves the pharmacy counter of long lines and gives the customer an opportunity to shop while waiting for the refill to be processed.

The kiosks also will feature rolling graphic presentations for the store in which it resides. The presentations can advertise sales, the pharmacy web site, pharmacy specializations or anything the store would like to highlight.



There are many extras available for the kiosks. Configurations will offer both a scanner for easy input of prescription information as well as the ability to use a network printer for printing drug monographs or disease information.

Because of their variety of options and their flexibility, CornerDrugstore kiosks are practical for both chain and independent pharmacies. The independent pharmacies can tailor the kiosk specifically for their store, but chain pharmacies can use the kiosk as a tool to inform customers of their other locations, their company web site, their particular store and their sales and advertisements. Also it is possible for chain stores without pharmacies to use the kiosks to accept refill requests for pharmacies in other store locations.



CornerDrugstore remains committed to our goal of offering the best in technology to our independent and regional chain customers. Watch for more new exciting enhancements and products as we continue to bring affordable technology to your pharmacy.

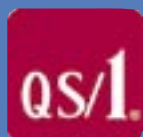
By: Chris Sigmon  
Director of Web Products, QS/1



The QS/1 Customer Conference 2003 in San Diego was a huge success. We enjoyed meeting many customers we typically do not see when we are on the East Coast. Everyone enjoyed the meeting, and we are looking forward to another successful meeting next year.

Customer Conference 2004 will be in Baltimore, Maryland. Check our web site at [www.qs1.com](http://www.qs1.com) for more information. See you in Baltimore.

Tammy Devine, Vice President for Marketing, QS/1



Customer Conference

July 30 - August 3

2003



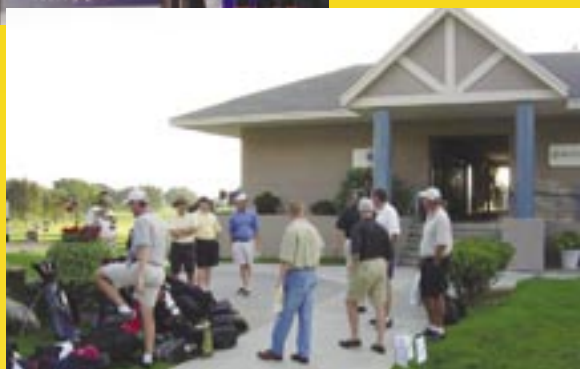




Issues raised at last year's conference have been addressed. Having the test site liason has helped me as a test site, and I was very happy to be at this year's conference. Generally this year the pharmacy sites seem happy with the changes, and our needs have been well covered.

Jim Whitehead  
Northside Hospital Forsythe Pharmacy  
Atlanta, GA





When I saw John Frady demonstrate Workflow in Toronto two years ago at the International Customer Conference I said, 'This is just for big institutional pharmacies, not for small pharmacies in rural areas.' But about a year ago I asked my staff, 'What can make us work more efficiently?'" and they said if we knew where things were. That is one of my reasons for going to San Diego. We trained on Workflow in March, and it has helped tremendously. My mistakes are almost zero.

Joan Favero  
Medical Center Pharmacy  
Yreka, CA



The conference was good and informative, one of the best conferences yet. All of the speakers were great, especially Andrea Stark and Michael Bell. I had seen them in Charleston, and as far as I am concerned they can come to all the conferences.

Bill Morrison  
Morrison's Pharmacy  
Camden, AR

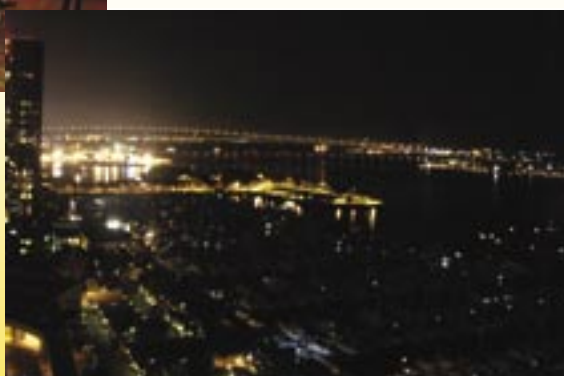
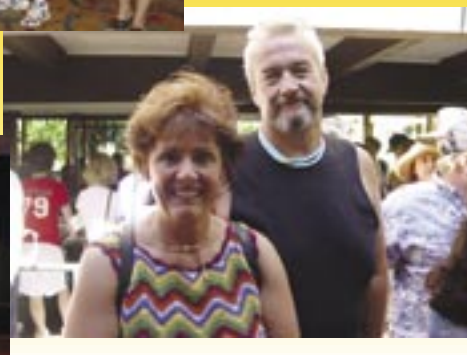
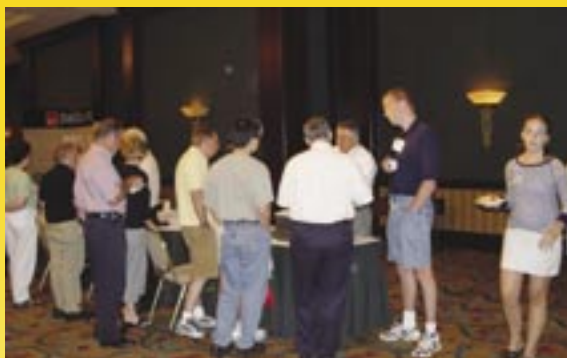






I really enjoyed being in San Diego. The speakers were good and relevant to the practice we have. The technology speaker was excellent and was so excited about the subject he made everyone excited. And the HIPAA speaker also was very helpful. Overall I had a good time; all the attendees and QS/1 people were very friendly and helpful; they made me feel welcome, and that is great customer service. It also was good to interact with other users of our system. I am looking forward to the next conference.

Bronnie Peacock  
Panama Pharmacy  
Jacksonville, FL





## IVR

The QS/1 IVR system's flexibility allows for customization of script messages and changes in configurations to suit your store needs. In order to keep up with your current script information, QS/1 has developed a database that allows the customer access to their personalized script through the QS/1 web site. This online database allows you, as a customer, to enter your initial script and submit that script electronically to our QS/1 IVR specialist. Our specialist will review your script and assist with any necessary changes in order to ensure that you receive the best QS/1 IVR system possible. You will be able to view your current IVR script at any time and make changes to your script as your pharmacy changes. Once changes are made to your script via the web site, click the submit key. Our QS/1 IVR specialist will be notified for review and processing.

Listed below are the procedures in order to access the IVR information via the QS/1 website:

Access [www.qs1.com](http://www.qs1.com).

Click on Support, located in the column on the left side of the homepage.

Click Login.

In the Customer ID field, enter the pharmacy's System ID.

In the Password field, enter the five-digit zip code of the pharmacy.

Click Login.

In the column on the left side of the page, click QS/1 IVR.

Enter an initial script or make changes to an existing script.

QS/1 will incorporate one free script change within the first 90 days of initial use. Afterwards, you will receive one free script change per year.

## Architext Labels

Beginning in early 2004, Architext will be offering a new method for distributing warning label information to pharmacies. Until now, pharmacies had to purchase DIMM (Dual Inline Memory Module) cards for their printers. The DIMM cards were a hardware solution containing the necessary label information, but the only way to update was to buy new memory cards. With the introduction of a software solution for the prescription labels, the information can be updated with each release. The new solution is a file saved to the hard drive of the pharmacy's computer that will contain everything the pharmacy will need to print warning labels.

With the DIMM card system, pharmacies often buy the cards only when they buy a printer. In addition, pharmacies must purchase a DIMM card for each printer, and the cards cost approximately \$300. Therefore many pharmacies have out-of-date information. As new drugs enter the market, new warning labels are necessary, and sometimes existing labels are modified or combined. By not replacing old DIMM cards with current cards, pharmacies run the risk of the system specifying a drug label the printer does not have. Today's pharmacies and prescriptions are very different from those even five years ago. Having up-to-date label information is crucial for pharmacies to stay on the cutting edge of their business and to retain customer loyalty.

With the new file system, pharmacies will need only one file. There are no special hardware requirements, and QS/1 will provide the software necessary for installation. For pricing and more information regarding the new Architext files, please call QS/1 at 1.800.845.7558.



## NRx Update

The initial development of NRx, the pharmacy software system with a graphical user interface (GUI), was completed in July. The first version of NRx is a very basic pharmacy system. Accounts receivable, batch billing and Workflow are being evaluated for the second version of NRx and will be available in the future.

In the meantime, QS/1 staff previewed this new product for attendees at the QS/1 Customer Conference in San Diego, California. NRx also was on display at NACDS, the annual trade show for chain drug stores. This display was the first time customers had a "hands on" experience with NRx to get a feel for the new product. The feedback from customers working with NRx for the first time was very positive, and QS/1 is looking forward to making the product available to all customers.



## ASP Hosting Update

QS/1 has installed the first university to use our ASP solution at Arkansas State University-Searcy and has introduced a program offering any U.S. school of pharmacy the opportunity to use our ASP solution in their practice labs at no software cost.

“Our goal in announcing this ASP solution for free to pharmacy colleges is to offer the most advanced pharmacy management software solution and a strategic educational advantage to universities in attracting future pharmacists,” says Ed Willett, QS/1 Marketing Accounts Manager.

This ASP solution offers customers reduced cost of ownership and deployment time, faster scale-up, increased flexibility, more widespread access and tighter security. QS/1 hosts this ASP solution in the Data Operations Centers in Spartanburg, South Carolina, and Richmond, Virginia, to provide redundant operations and fault tolerant power, computing, data networks and automatic data backups for customers.

“We increased our product offerings to include ASP products and services to give customers greater flexibility, convenience, security and cost effectiveness. We will continue to provide clients with solutions aimed at strengthening their businesses,” says Willett.

QS/1 provides the installation and configuration support and also monitors and manages the hardware and software to ensure that customers always have the most up-to-date software. QS/1 also supports all ASP solution customers with automatic price updates, clinical updates, virus updates, claims transmission and software maintenance.

## CDS Updates

The CornerDrugstore.com staff has completed the first phase of their web site redesign and have updated all graphics, lending the site a more professional look and feel. They have accomplished their goal of emphasizing the pharmacy and are moving to phase two of the improvements, making the site less cumbersome and more intuitive.

The staff contracted a consulting firm within the medical/pharmaceutical industry to conduct surveys. The firm presented a 100 page report of items to improve CornerDrugstore.com usability. The plan now is to implement issues to improve the site’s ease of use, especially with prescription refills.

Response to trial programs for QS/1 customers to integrate CornerDrugstore.com into their pharmacy strategies has been positive. Because the base cost of CornerDrugstore.com services is only \$420 per year, it is an option Chris Sigmon, Web Products Manager, encourages all pharmacies to consider. He wants to continue to improve the offerings and keep up with trends in the market.

“It is not worth losing one customer because our pharmacy was unable to offer technological advantages,” he says.

Sigmon also points out that “technology is leveling the playing field for community pharmacies compared to chain businesses who have more access to advances due to the nature of their bigger business parent.” Therefore, CornerDrugstore.com can be a tool for any independent pharmacy to compete with their chain counterparts.

“Our aim in raising the level of CornerDrugstore.com as a series of Internet services and programs is to raise the level of offerings for our pharmacies,” Sigmon says.





# From the Support Center



Visit our web site at [www.qs1.com](http://www.qs1.com) and review the Frequently Asked Questions section.

## RxCare Plus and PrimeCare:

Backing up your accounts receivable files before running your AR statements is a very important step. The before statement backup should be completed immediately before running statements but after you have posted all items. If you are on release 17.2 or higher you have two options for backing up your file. You can either backup to the hard drive or to 3.5 diskettes. When using the hard drive backup, change your path and file name for the before and after. (Example: The before statement backup path may be C:\ARBEFORE and the after backup C:\ARAFTER.) You must turn on this option in the Security Access for each person who has access to backing up files.

If you are getting the "Customer Aged, Unable to Post" message when posting either credits or charges to charge accounts you will need to compress your ARFILE.

## PrimeCare:

If you admit patients through the Admit/Discharge/Transfer feature, modifications have been made to this program. Contact customer support at 1.800.845.7558 ext. 290 to receive the modified programs.

When filling a prescription using the F6 function to profile a prescription for the fill list, run Supplemental Fill List: F2-Fill List Functions, F8-Fill List Utilities, F3-Supplemental Fill list, choose the facility for which to run the supplemental.

## Fastclaim:

General rejections and solutions for sending claims via PowerLine:

- Rejection of E9 M/I Provider ID: Access page 4 of the price code and \$ out the RPH Id Qualifier.
- Rejection of M/I Alternate Product/Service ID Qualifier: Access pages 3 & 4 of the price code; change the Drug option to 2.
- Rejection of M/I Diagnosis Code Qualifier: Access page 3 of the price code; change cardholder to 2.
- Rejection of M/I Sales Tax Basis: Access page 6 of the price code, making sure all Tax options are set to N.
- Rejection of M/I Pre scriber ID Qualifier: Access pages 3 & 4 of the price code; change the DOC Options to 2.
- Rejection of M/I COB/OTH Payments not supported: Arugus does not support secondary claims on 5.1.

## Hardware:

If you are using the new QS/1 QBack system, run the transfer while no one is working on the system to prevent any problems.

## SystemOne:

For an upcoming release: You will have the opportunity to print a 10 month option letter from the transaction record. The transaction must have a price code of M and also must be a rental. The item must be cappable and have its Print on Deliver flag set to YES.

## CRx:

Steps to manually reverse a script:  
MM.1.2. S to Submit, choose CASH, then choose Claim Submission and type Y for yes. You will then get a message that reads, "This claims submission will create a manual reversal." The script will default back to Cash.

## Partial Fills:

Qty Intended should only be different than Qty Dispensed when you do not have medication on shelf.

## CRx Hardware:

### Norton Antivirus

Please check your Subscription Date to ensure it is not expired. If it is expired you will need to update your program to ensure that it checks for the most current virus definitions. Also make sure Automatic Live Update is turned on.

As always be sure to check your backup logs daily. Any question please call customer support.

## CMS:

If your CMS system is on a wide area network (WAN), you can export price updates to each site that is on the same WAN.

## Reconciliation:

You can now unpurge a check by going under Tools within Reconciliation if you are on release 17.7.



# QS/1 Announces New Dallas Office

The Gulf States Region's Dallas office relocated August 4, 2003. The new facility is 60% larger than the previous building and has a larger hardware maintenance warehouse with more in-stock inventory. The new facility also has two separate training classrooms, both larger than the single classroom in the original facility. Although the new location's address is in Richardson, the physical location has moved only eight miles north and is only 30-45 minutes from either Dallas airport.

The Dallas office staff would like to extend an invitation to all customers for an open house the week of Dec. 1 - 5, 2003. The open house hours will be 11am - 1pm with a seminar following until 3:30pm then another open house from 5pm - 7pm with a seminar following until 9:30pm. The seminars will cost \$25 per person. Please RSVP with the Dallas or Brandon office by November 15.

Dec. 1: RxCare Plus Seminars

Dec. 2: RxCare Plus Seminars

Dec. 3: CRx Seminars

Dec. 4: Point-of-Sale Seminars

Dec. 5: SystemOne Seminars

QS/1 Gulf States Regional Office

1910 Firman Drive; Suite 120

Richardson, TX 75081

800.248.0096 toll free

972.744.0120 phone

972.744.0125 fax



From left to right, back row: Paul Cofer, Don McNeely, Glen Holden, Buford Abeldt, Gary Shobe, Mike Spann, Bill Peckat  
Left to right, front row: Greg Clark, Brian Boyd, Leah Simmons, Carey Himel, Susan Wascher, Tony Pierce, Meredith Abeldt, Dennis Antici, Rob Young, Linda McNeely, Eric Moore. Not pictured: Chuck Coburn, Daniel Hoelscher

# IN YOUR AREA

## Training Seminars

### West Coast Region:

Valencia, CA: (866) 848-1942  
 10/07/2003 A/R & 3rd Party Reconciliation  
 10/23/2003 SystemOne: A New Look  
 11/11/2003 Basic Rx Processing & Enhancements  
 11/27/2003 SystemOne: A New Look  
 01/13/2004 RxCare Plus & PrimeCare Workflow  
 02/10/2004 General Overview & Questions  
 03/09/2004 QS/1 Report Logic

### Mid-Atlantic Region:

Indianapolis, IN: (800) 637-5251  
 10/07/2003 CRx: Overview/Enhancements  
 10/16/2003 RxCare Plus: Disease State Management  
 11/13/2003 RxCare Plus: Enhancement Review  
 12/11/2003 PrimeCare: Enhancement Review

Lexington, KY: (866) 441-7011  
 10/16/2003 RxCare Plus: System Review  
 11/11/2003 CRx: Overview/Enhancements  
 11/20/2003 SystemOne: GUI Operation Review

Richmond, VA: (877) 392-5851  
 10/09/2003 RxCare Plus: Overview/Enhancements  
 10/14/2003 CRx: Overview/Enhancements  
 10/23/2003 POS: Overview & Frequent Shopper Setup  
 11/18/2003 CRx: Overview/Enhancements  
 11/20/2003 PrimeCare: Overview/Enhancements

### Midwest Region:

St. Paul, MN: (800) 541-5358  
 10/13/2003 RxCare Plus & PrimeCare:  
 Reports & File Maintenance  
 10/14/2003 RxCare Plus: Nursing Home Processing  
 11/18/2003 RxCare Plus & PrimeCare:  
 A/R & 3rd Party Reconciliation  
 12/16/2003 RxCare Plus & PrimeCare: Workflow

### Southeast Region:

Spartanburg, SC: (800) 889-9183  
 10/09/2003 RxCare Plus: Nursing Home  
 10/16/2003 PrimeCare: Fill List Processing  
 10/23/2003 SystemOne: A New Look  
 11/06/2003 RxCare Plus: A/R  
 11/13/2003 POS: Basic Operations  
 11/20/2003 SystemOne: New Look  
 12/11/2003 RxCare Plus: A/R Reconciliation  
 12/18/2003 POS: Basic Operations

Miami, FL: (800) 889-9183  
 11/06/2003 RxCare Plus: Basic Mode  
 11/13/2003 POS: Basic Operations  
 11/20/2003 SystemOne: Basic Operations

Orlando, FL: (800) 889-9183  
 10/09/2003 RxCare Plus: A/R Reconciliation  
 10/16/2003 POS: Basic Operations  
 10/23/2003 SystemOne: Enhancements  
 12/11/2003 RxCare Plus: Enhancements  
 12/18/2003 POS: Basic Operations

### Northeast Region:

Sturbridge, MA: (800) 648-7428  
 09/18/2003 PrimeCare: Basic Processing  
 09/23/2003 SystemOne: Claim Submission, The New ANSI Format  
 10/02/2003 SystemOne: Claim Submission, The New ANSI Format  
 10/15/2003 CRx: Basic Processing

Mechanicsburg, PA: (717) 795-2700  
 09/17/2003 Point-of-Sale: Basic Processing  
 09/23/2003 SystemOne: Claim Submission, The New ANSI Format  
 10/09/2003 SystemOne: Claim Submission, The New ANSI Format  
 10/16/2003 PrimeCare: Basic Processing

\$25.00 per person per seminar  
 (FamilyCare Members: one person per month FREE)

To register or for more information, contact your  
 respective regional office two weeks prior to the  
 seminar. Seating is limited.



# IN YOUR AREA

## Trade Shows

Manhattan Beach, CA

October 2, 2003:

HD Smith Wholesale

Atlanta, GA

October 9-11, 2003:

Medtrade Fall/East

Booth #3515

Seattle, WA

October 18-22, 2003:

National Community Pharmacist Association

Booth #424

Research Triangle Park, NC

October 27-29, 2003:

North Carolina Association of Pharmacists

Salt Lake City, UT

October 28, 2003:

DMERC-D Workshop

Las Vegas, NV

November 2-4, 2003:

Western Food Industry Expo

Booth #518

Seattle, WA

November 4, 2003:

DMERC-D Workshop

Groton, CT

November 5-6, 2003:

Northeast Pharmacy Service Corporation

Virginia Beach, VA

August 3-6, 2003:

Virginia Beach Association

Council Bluffs, IA

November 6-7, 2003:

Midwest Association of Medical Equipment Service

Phoenix, AZ

November 11, 2003:

DMERC-D Workshop

Dublin, OH

November 11-12, 2003:

Ohio Association of Medical Equipment Services

San Antonio, TX

November 12-15, 2003:

American Society of Consultant Pharmacists

Booth #140

San Diego, CA

November 13, 2003:

DMERC-D Workshop

Torrance, CA

December 2, 2003:

DMERC-D Workshop

Fullerton, CA

December 4, 2003:

DMERC-D Workshop

New Orleans, LA

December 7-11, 2003:

American Society of Health-System Pharmacists

Booth #923



Go to [www.qs1.com](http://www.qs1.com), QS/1's web site, for the most current training and trade show information.

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