

INSIGHT

April 2005

THE QS/1 MAGAZINE

Going Paperless ?



www.qs1.com

Paperless technology is the cutting edge of what is available in the healthcare industry. At QS/1, we are at the forefront of the latest software and services. New features such as document scanning and centralized profiles will soon join options such as e-prescribing to create a more seamless and efficient work environment for QS/1 customers. In this issue of *Insight* we are revisiting some of the existing methods of maintaining a paperless business and are previewing some of the forthcoming means of further reducing paper clutter for a simpler work environment.

Also in this issue is a spotlight on The Medicine Shoppe #0283 in East Patchogue, New York. Bernie Siegel, the store's owner and pharmacist, explains how the gambles he has taken with technological advances have paid off and have helped him keep a positive outlook through his 25 years in the business.

We are pleased to offer more information about some of the newest developments for QS/1 customers. We have a thorough review of Release 18.1 security features, a complete history of QS/1 updates and an explanation of the move to USB ports for computer peripherals. And we are proud to feature the latest AutoMed news from Michael Stotz as well as a follow-up article regarding selling HME as a front-end profit center by Jack Evans of Global Media Marketing.

This issue of *Insight* is complete with the most recent information available from us at QS/1. We look forward to sharing more with you as we go through 2005. Check out the agenda for our July 2005 Customer Conference to find out more about the great product demonstrations and industry speakers coming to Orlando (pages 24-25). We hope to see you there!

Bill Cobb
President, QS/1





April 2005

CONTENTS

The QS/1 Magazine

- 4 Selling HME as Your New Front-End Profit Center, Part 2**
By Jack Evans, President, Global Media Marketing
- 5 New AutoMed Systems Finds Space in Your Retail Store**
By Michael Stotz, Marketing Communications, AutoMed
- 6 Release 18.1 Update**
By Kerry Philbeck, Creative Services Technician, QS/1
- 8 Now in Pharmacies on DVD: QS/1 Quarterly Updates**
By Kathryn Hix, Creative Services Technician, QS/1
- 9 Customer Spotlight: The Medicine Shoppe #0283**
By Beverly Knight, Staff Writer, QS/1
- 10 Document Scanning**
By Chuck Gordon, Market Analyst, QS/1
- 12 Making the Most of Workflow in PrimeCare**
By Kathryn Hix, Creative Services Technician, QS/1
- 14 Going Paperless**
By Kathryn Hix, Creative Services Technician, QS/1
- 18 NRx & CMS: Centralized Profiles**
By Rich Muller, National Sales Manager, QS/1
- 20 Speaking One Language:
New Computers Consolidate with USB Ports**
By Beverly Knight, Staff Writer, QS/1
- 21 FamilyCare Reconciliation**
By Randy Burnett, Healthcare Services Supervisor, QS/1
- 22 Increasing Patient Compliance**
By Dan Gerst, Marketing Operations Manager, QS/1
- 23 VPN Replacement**
By Beverly Knight, Staff Writer, QS/1

In this Issue:

Conference
Trade Shows
Product Updates
From the Support Center
In Your Area

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Selling HME as Your New Front-End Profit Center, Part 2

by Jack Evans, President, Global Media Marketing

In the January 2005 issue of Insight, Jack Evans introduced his Four Stages of Building Your HHC (Home Healthcare) Business, beginning with Showroom Size versus Sales and Designing and Merchandising Your HME Showroom. Now Evans describes the final steps in the process of increasing your HHC business.

HME Salesperson = HME Sales

This is a bold statement, but HHC products and supplies are not OTC products that sell themselves. Someone must qualify a customer to find out the end-users' home healthcare needs and then demonstrate related HME products that will help them maintain or improve their daily quality of life.

Dedicate a retail clerk as your HME salesperson to work the showroom during specific retail hours. Provide product training by having HME vendors and distributors inservice them on a regular basis before your business opens. Provide these HME salespeople with name tags that specify they are "HME Specialists" or "Home Healthcare Professionals" to let your customers know they are now experts in HHC. And remember that HHC salespeople are like anyone else in sales in that they work in response to the incentives that are provided to motivate them. The average HME commission paid is 7 to 10 percent on monthly HME gross sales.

Outside sales to referral sources are also very important for the growth of an HME business. Simply have your new HME salesperson visit local healthcare professionals one or two mornings each week on a monthly rotational basis. Find out what their patients need in relation to homecare products and services. Then provide these products and services and let your referral sources know you are helping to educate and care for their patients at home. Inservice your referral physician office managers and nurses by category so that they learn what products are available to better care for their patients at home.

Sell Retail HME

Most HME products in a retail setting are sold in exchange for money, whether cash, check or credit card. Without any 60 to 90-day payment delay from insurance, cash is deposited daily to help fund ongoing operating and marketing expenses.

In the retail HME business, store location is first and foremost. The business is located in a highly visible and easily accessible area where customers are already shopping for healthcare products. Independent drug stores experience double-digit growth when they offer their own customers HME products and supplies. The key to success is to transition from a drug store with one HME planogram on an aisle to a HHC pharmacy with HME in front and the pharmacy counter in the rear.

Provide an attractive retail showroom in which HME products are displayed openly for customers to touch, try and buy. A complete product selection needs to be offered, enabling customers to choose between two or three options from basic to deluxe models. Customers are treated as top priority, regardless of ringing telephones, incoming prescriptions or billing issues.

Traditional HME Reimbursement Business

The traditional HME business is a far contrast from a retail drug store. The HME products are stored in a commercial or industrial storeroom, provided to the patient when they present a doctor's prescription and then billed to and paid for by a third-party payor. But drug stores selling HME do not have to necessarily pay for the expenses of a billing expert and billing software to sell Medicare or other insurance patients.

Most drug stores that sell HME simply outsource their billing. These billing companies charge either a percentage of the claim, i.e. 4 percent to 8 percent, or a flat fee per claim, i.e. \$2.50 to \$3.50. They also submit these claims electronically to speed up payment within two or three weeks.

Profiting from HME

When drug stores incorporate HME into their businesses, they usually open with a fanfare of advertising, PR and a grand opening complete with ribbon-cutting and local dignitaries. Sales usually start at \$500 days for a \$10,000 month, grow to \$20,000/mo for several months and then slowly grow to \$30,000/mo and then \$40,000/mo. The first year gross sales will reach \$500,000 or \$600,000. The second year usually peaks at \$1 million, with Saturday HME sales averaging \$5,000.

Note that the days and hours of business directly affect your bottom line. Seven days is not always cost-effective, but Saturday is usually a busy retail shopping day. Also, staying open until 6 or 7 p.m. one or two evenings will bring in the after-work caregivers. The more convenient you make shopping in your HHC showroom, the higher your sales, number of repeat customers and sales-per-customer.

Most of your regular customers already have some level of need for HHC products. Your goal is to become their local HME resource and help them better care for their loved ones at home.

Jack Evans, president of Global Media Marketing, is an educator and marketing specialist in HHC. He works with HME providers and drug stores to develop retail layouts, merchandising, sales training, marketing and advertising programs. He can be reached at www.retailhomecare.com or 310.457.7333.

New AutoMed® System Finds Space in Your Retail Store

Lot of prescriptions? Not much space in your retail pharmacy? Short on staff? AutoMed®, AmerisourceBergen's automation division, has just what you need.

The new Efficiency Pharmacy™ 300S configuration from AutoMed combines space- and step-saving automated devices and workflow software to redefine pharmacy efficiency in a compact environment. The Efficiency Pharmacy 300S

brings together three innovative AutoMed systems: the Efficiency Pharmacy™ R400W prescription fulfillment system, Efficiency WorkPath™ complete dispensing workflow management software and the FastFind Universal storage and retrieval system. This solution, which automates 100

percent of a pharmacy's orders, all fits into an operational space of 300 square feet and can be staffed by one pharmacist and two technicians per shift.

The AutoMed Efficiency Pharmacy R400 automates the top-moving 100 oral solids in the pharmacy. It speeds the entire prescription fulfillment process and improves accuracy—all in less than 10 feet of counter space. The system automatically counts, sorts and fills. The R400 reduces the risk of prescription-filling errors and gives you and your pharmacists more time to spend with your patients.

What the R400 doesn't automate is taken care of by the space-saving FastFind Universal automated carousel. This vertical carousel takes advantage of normally idle storage space in your pharmacy by extending to the ceiling. It allows up to 60 percent more storage capacity. The carousel can store the entire formulary of a 1,000 script-per-day retail pharmacy in just 60 square feet of space! It automatically brings injectables, IVs, bulk medications or other pharmacy items to eye level, thus reducing restocking and picking time.



Both the R400 and the FastFind Universal are controlled by the dispensing workflow management software, Efficiency WorkPath™. This software dramatically improves the overall efficiency of your pharmacy. Efficiency WorkPath streamlines the fulfillment of both automated and manual processes. The system directs pharmacists and technicians to the appropriate automation

device, storage shelf or drawer, where on-screen product image and barcode scanning verifies the accuracy of each prescription.

AutoMed perfected the Efficiency Pharmacy 300S configuration in Edina, MN's PrairieStone Pharmacy. The small pharmacy situated inside a Byerly's grocery store is capable of

volumes of more than 400 scripts per day without adding staff or increasing wait times.

"We've gotten a lot of feedback from customers," says Stephanie Fetter, CPhT, a pharmacy technician at PrairieStone. "They wonder where we're storing all of our medications because they're used to seeing rows and rows of traditional shelving. We show them the AutoMed technology in operation. They're just amazed by that."

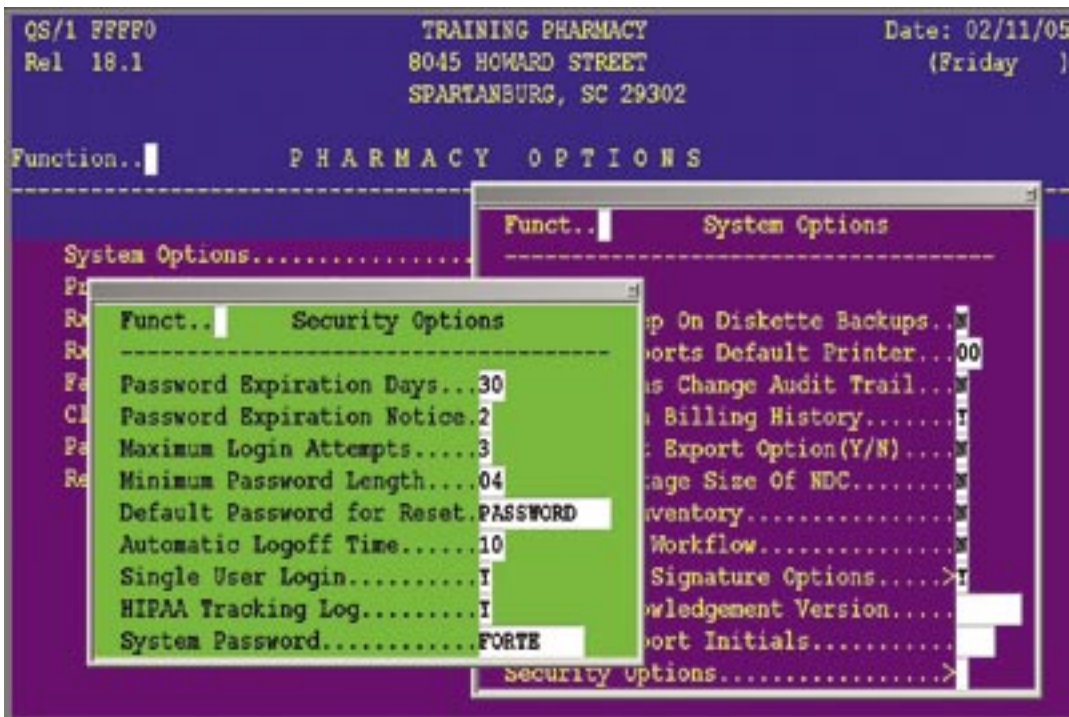
The Efficiency Pharmacy 300S provides maximum storage, quickly fills prescriptions, boosts efficiency, and ensures patient safety—while finding you extra space in your store you never knew you had!

For more information, please contact your AmerisourceBergen Account Manager, or go to www.automed.com.

by Michael Stotz, Marketing Communications, AutoMed

QS/1's Release 18.1: New Security Access

As a business owner/operator, nothing is more important than your customer base - their confidence in the service you provide and their safety. In these technology driven times, QS/1 has developed multiple safeguards designed to protect both you and your customers.



QS/1's Release 18.1 was designed primarily to address Security Access among all QS/1 products in order to comply with HIPAA requirements. However, QS/1's Release 18.1 enhancements exceed those expectations by creating a stable platform in which to make future changes and incorporate elements, now and in the future, which aid in making all QS/1 products function more effectively. "The new Release 18.1 architecture improves performance and is more customer friendly," adds QS/1 Market Analyst, Duane Ridenour.

Security features have been greatly improved in accordance with HIPAA requirements and address all QS/1 software products. Modifications have been made to QS/1 password standards as well as login/logout procedures, ensuring

that customer information is kept confidential and your customer's trust in your business remains high.

Release 18.1 combines all access into a central employee security file. The new employee/security file has replaced the password table, the pharmacist name table and the technician name table. All general security and pharmacist/technician accesses are found on the same record, giving each employee one specific password that works for all QS/1 software systems.

A new field, Security Options, has been added to the Systems options. Here you can input how many days are allotted to each specific area before expiration occurs.

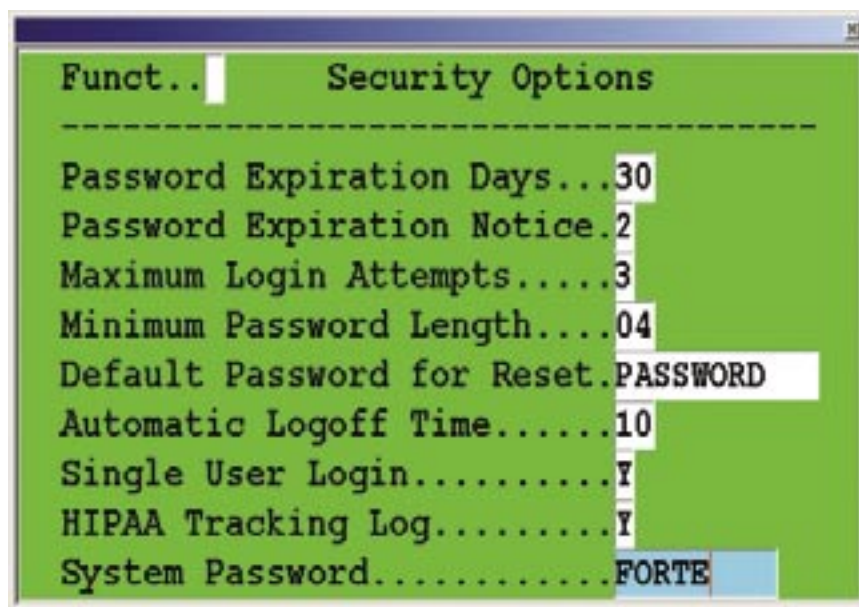
Features

by Kerry Philbeck, Creative Services Technician, QS/1

The following enhancements have been made to all QS/1 systems and include:

- Password expiration days: The number of days that the password is valid ranges from 1-99
- Password expiration notice: Select a value that triggers the system to notify you when your password is about to expire or has expired
- Maximum login attempts: Define the maximum number of login attempts
- Single Use Login: Place a "Y" in this field to allow you to log in only once for all portions of the system
- HIPAA Tracking Log: Place a "Y" here to allow you to track access to patient information
- Automatic logoff time: Choose the number of minutes that the system will automatically log off after a period of inactivity. Please note, when the system logs off, you will receive the following message:
In order to protect the 'Privacy of Personal Health Information' this client session has been terminated after a predefined period of inactivity

Additionally, Release 18.1 provides various security functions, including New User, View Inactive Users and View All Stores (Enterprise only). Reset Employee has been added to the General, Pharmacist and Technician security access screens. This function allows the supervisor with access to the security screens to reset operator passwords. Once the new password is activated, the employee user ID is unlocked and the operator's password becomes the default password, which is located in the store file. Also, the new toggle function on the security scan allows operators to toggle between user ID lists which include all access, pharmacist access and technician access. A new field, Inactive, has been added to security access. You can inactivate an operator's access by simply typing a "Y" here. Inactive operators and those which are flagged for deleting will not be displayed.



Other features include:

- The login screen now has a new function which allows the operator to change his password at any time
- The Change Password function has been added to the Prescription Processing screen
- Passwords must be eight characters in length and may consist of upper or lower case letters, numbers, symbols or a combination. New passwords must not be identical to any of the previous three
- HIPAA Tracking Log has been added to Patient Lists; this report tracks all access to the patient and contains the Patient Code, Patient Name, Access Date, Access Time and the Accessed By information
- The HIPAA Tracking Log has been added to Automatic File Purges, Compression File Backup, Copy Files the Individual Key File Build

For a listing of all Release 18.1 enhancements, please refer to your QS/1 Help files. QS/1 is working hard to provide you and your customers with the safety and peace of mind you deserve.

Now in pharmacies on DVD . . . QS/1 Quarterly Updates

by Kathryn Hix, Creative Services Technician, QS/1

Programs and information for quarterly updates are now available on one DVD from QS/1. Formerly this information would have required 2,940 diskettes, or the equivalent of seven CDs, for delivery. The DVD represents an exponential increase of data capacity in transferable media, and the DVDs QS/1 offers can contain as much as 4.7 GB.

The DVD is a one-disk solution that contains QS/1 updates, utilities and the latest service pack. The consolidation represents the material from three separate CDs joined on one DVD. "In a sense the move to DVD updates does replace three pieces of media," says Dina Cooksey, Project Planning and Delivery Manager for QS/1. "The two CDs we were sending before were at full capacity, so Service Packs required a third disk because they would not fit on either the Update CD or the Utilities CD for distribution." The transition to DVD updates should be seamless during the installation process because DVD

performance is identical to that of CDs. There is only one difference between the CD updates and the DVD updates, and Cooksey says it is one customers will appreciate. Utility programs as well as system and clinical updates are all available on one DVD. Therefore, customers do not have to switch between CDs to load the different programs.

The DVDs are built with the latest programs and information available and are current as of their build date. Naturally, by the time the DVDs are delivered to customers, new changes are already available. Therefore, QS/1 provides new service pack updates via the Internet. Service packs are cumulative, so as long as the most recent service pack is deployed, the system contains everything since the DVD was built.

Cooksey points out one important reminder for all customers. "If customers haven't upgraded to DVD drives, we are not going to send them a DVD," she says. "Although a majority of our customer base has a DVD drive and

can use the updates in this new format, we will continue to support those who do not have the ability to read DVDs."

The first DVD updates were mailed to customers with DVD drives during January 2005 with a letter explaining the change of media. The current offerings are the beginning of QS/1's slow migration to offering updates exclusively on DVD. Eventually it will be necessary for all QS/1 customers to move to the DVD format in order to accommodate the influx of new programs and the growing number of updates essential to maintaining QS/1 software. This move is in response to the quickly growing number of necessary updates and is an attempt to make this quarterly process easier for customers. According to Tammy Devine, QS/1 Vice President, "Now, as database services are growing, customers really need to update their information quarterly. With DVD updates we can combine all of the necessary information into one disk rather than having to work with multiple CDs."



420 Diskettes = 1 CD



7 CDs = 1 DVD



1 DVD

Customer Spotlight

The Medicine Shoppe #0283 East Patchogue, New York

by Beverly Knight, Staff Writer, QS/1



When Bernie Siegel opened The Medicine Shoppe in East Patchogue, New York, 25 years ago, he couldn't have anticipated the technological revolution that has affected the way he does business. But it hasn't changed his philosophy of growing through serving the customer.

"Our niche is strong customer support, and we know our patients very well," Siegel said.

Now he, along with two technicians, fills an average of 125 prescriptions a day. The pharmacy does not sell greeting cards or cosmetics, but it does carry home medical equipment, initially stocked as an added service to customers. HME sales

"I have a nice life. I still enjoy getting up every morning and going to work."

Bernie Siegel
The Medicine Shoppe #0283
East Patchogue, New York

make up only 10 percent of the business, but they have benefited pharmacy sales as well. Siegel began by stocking only the HME products his pharmacy customers needed, primarily diabetic supplies, but as he expanded his line he found that new HME customers often became pharmacy customers.

Without advances in technology, he said, it would be impossible for him to manage both the prescription and HME sales. Business today is different than it was in the 1980s when his was the first pharmacy in the area to computerize.

"When we computerized 23 years ago, we had huge computers that took over my back room," Siegel said. Thinking back over the many upgrades that led to the current compact system that keeps paperwork flowing smoothly, Siegel said he could not provide the service he does without the computer software that allows time for interaction with customers.

Even though he grew up working in his father's pharmacy, Siegel's family tried to persuade him not to go into the profession, primarily, he said, because of the long hours his father worked in his pharmacy that was open 12 hours a day, seven days a week. At that time, the technology to help manage the business more efficiently was far in the future.

But Siegel did become a pharmacist, and after 16 years with his father, he "took a gamble," going out on his own.

That gamble has paid off, and largely, he says, because he committed himself to keeping abreast of changes. Soon after he opened his pharmacy it became a QS/1 test site, something he credits with keeping him "ahead of the curve."

"Over the years QS/1 provided me with the latest features and technology. They were always innovative and often came out with new features I thought I had no use for. Then six months down the road I'd find I needed them," Siegel said.

The move toward third party billing, with 80-90 percent of The Medicine Shoppe's transactions billed out to insurance companies or other third party entities, is something he says would be impossible to manage without the software.

"Almost everything is done electronically now. Whatever we need to do, we have the software to do it," Siegel said.

Siegel sees the rapid introduction of new QS/1 technology as his advantage over larger competitors, and he credits today's features with his ability to enjoy a comfortable life. "In spite of competition from chains and the reduction in insurance reimbursement that has affected every pharmacy in the country, making it harder and harder to show a profit, I have a nice life," Siegel said. "I still enjoy getting up every morning and going to work."

New For You: Document Scanning Module for

QS/1 is pleased to announce that document scanning has been added to SystemOne for Service Pack 9 and is under development for RxCare Plus, NRx and PrimeCare. This feature gives customers the ability to scan and save documents to various records. One of QS/1's company goals is to help customers become a paperless office. While RxCare Plus has had the ability to scan prescription images since Release 17.2, QS/1 now is taking document scanning to the next level.

For SystemOne we have added the ability to scan documents for the item, patient, transaction, doctor and insurance records. Document names can be stored in tables for single documents or groups of documents. Once a document has been scanned, the customer will have easy access to view the scanned document from the record chosen. QS/1 pharmacy systems will have the ability to scan various types of documents for the drug, insurance, doctor, prescriptions, transaction, facility and patient (non-drug) orders records. Maintaining HIPAA forms, patient (face sheets), doctor authorization letters or any documents that must be stored to a particular record will become more efficient. Viewing access will be virtually at your fingertips.

Character-Based Systems

In the new module an option called Document Descriptions has been created for adding and editing the preset names of the documents that can be scanned. The employee security option will be checked in order to verify the employee has access to change these descriptions. In pharmacy, a list of descriptions are kept for all of the following files: drug, patient, insurance, doctor, prescription, transaction, facility and patient (non-drug) orders. For SystemOne, a list of descriptions will be kept for all of the following files: patient, item, insurance, doctor and transaction.



Figure 1

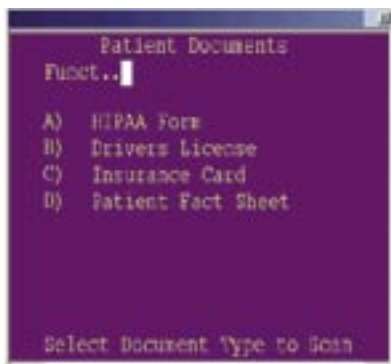


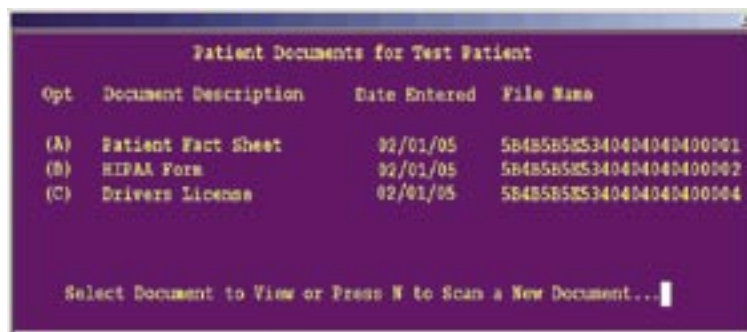
Figure 2

Figure 2 shows a list of document descriptions defined in the store file for SystemOne, RxCare Plus and PrimeCare. This window appears when the customer chooses to scan a new document if the system has more than one document description defined for the file type.

RxCare Plus, NRx, PrimeCare & SystemOne

by Chuck Gordon, Market Analyst, QS/1

Figure 3 is a list of scanned documents for a specific record (Test Patient's record in this case) for SystemOne, RxCare Plus and PrimeCare. This window appears when the customer chooses the document option and there is at least one document scanned for the record. The customer then can select the document to view or Press N to scan another document.



Opt	Document Description	Date Entered	File Name
(A)	Patient Fact Sheet	02/01/05	5B4B5B5E53404040400001
(B)	HIPAA Form	02/01/05	5B4B5B5E53404040400002
(C)	Drivers License	02/01/05	5B4B5B5E53404040400004

Select Document to View or Press N to Scan a New Document...

Figure 3

GUI Systems

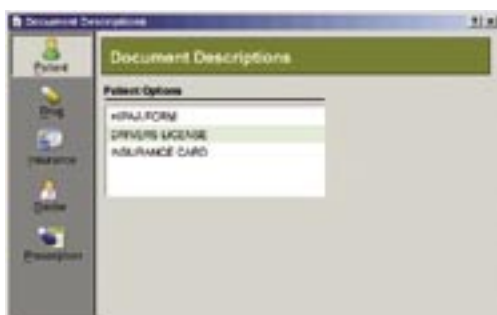


Figure 4

In NRx, as shown in Figure 4, document descriptions will be displayed as buttons on the vertical icon bar indicating the different files that can be scanned. SystemOne GUI will have the same option under store control.

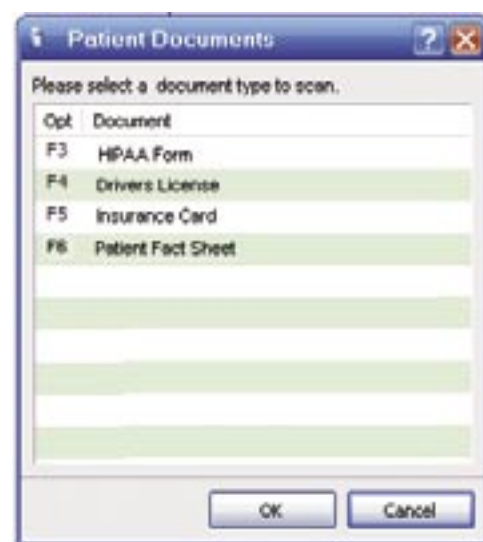
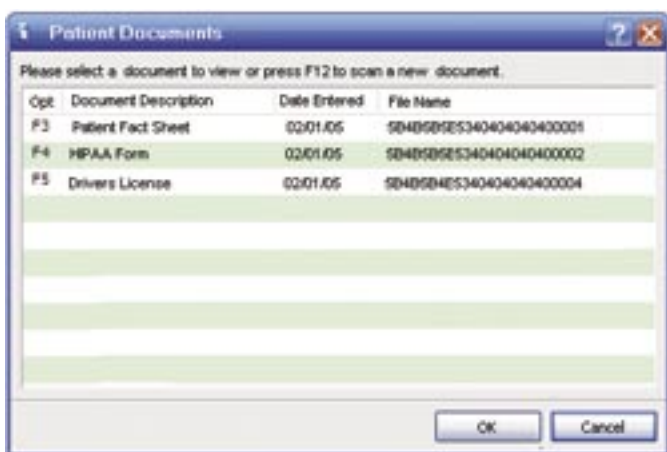


Figure 5

The window in Figure 5 appears when the customer chooses to scan a new document if the system has more than one document description defined for the file type. This list is pre-defined in store control.



Opt	Document Description	Date Entered	File Name
F3	Patient Fact Sheet	02/01/05	5B4B5B5E53404040400001
F4	HIPAA Form	02/01/05	5B4B5B5E53404040400002
F5	Drivers License	02/01/05	5B4B5B5E53404040400004

Please select a document to view or press F12 to scan a new document.

Figure 6

In Figure 6 a list of scanned documents displays for a specific record for SystemOne GUI and NRx. This window appears when the customer chooses the document option and there is at least one document scanned for the record. The customer then can select the document to view or Press N to scan another document.

When the documents are being displayed, the customer will have the ability to print the document, re-scan the document or flag the document for deletion. Once flagged for deletion, the document can be purged from the system at a later date.

Contact your QS/1 Sales Representative to purchase the SystemOne Document Scanning Module.

Making the Most of

1 Order Entry



“Mistakes don’t go out nearly as often and pharmacists aren’t nearly as stressed,” says Jeff Chodrow, Pharmacy Manager for KPS (Kindred Pharmacy Services) in Greensboro, N.C., of his staff’s improved accuracy since using the Workflow feature of QS/1’s PrimeCare software.

The staff of KPS Greensboro implemented PrimeCare’s Workflow solution early in 2004. The feature helps KPS Greensboro manage a business that generates 600-1,100 orders per day, 98 percent of which are received via fax.

Pharmacist Verification 2



“With the implementation of workflow, we can do many more prescriptions with the existing staff and without the added stress levels,” says Jeff Chodrow, Pharmacy Manager. “I used to go out and look at the backlog every two hours; now we don’t get behind if there is an interruption. Everyone is focused on clearing his or her queue.”

Prior to implementing the workflow process, employees would generate delivery sheets at 4 p.m. and again at 6 p.m. Drivers would manually check orders, a process that could result in errors. Now, employees use scanning capability to check in orders continuously and save the control drugs for the end of the day. The workflow system checks all orders to ensure accuracy. The new technology saves labor costs of at least \$2,000 a month from drivers; labor dollars saved are equivalent to one driver, seven hours a day, five days a week.

Zebra Printer 3



Chodrow explains that barcoding is the key to the current streamlined process. “The barcoding used here is essential. The primary advantage of this implementation is both improved accuracy and reduced labor costs. KPS Greensboro’s current

4 Label



5 Packaging



Workflow in PrimeCare

by Kathryn Hix, Creative Services Technician, QS/1

error rate per day is 0.03 percent; before (Workflow) it was about three times that,” he says. The reduced error rate leads to better performance for KPS Greensboro employees and allows pharmacists reduced stress.

Quality control with Workflow enables pharmacists to check all orders that leave the pharmacy rather than having pharmacy technicians identify problems. Chodrow says he has always used NDC Verification and that it is augmented by the quality control features of workflow. “I like the ability to pend – to pull things that are needing further review,” Chodrow says. “As I tell my pharmacists, 95 percent of orders don’t need further review, but the 5 percent that do influence the 95 percent that don’t.”

The pended orders at KPS Greensboro go to different queues depending on the nature of the issue. Prior approved or PDL issues are reviewed by a pharmacy technician and replaced in the processing queue. Data entry issues return to their origin in order for the information to be reentered. Two pharmacists at the verification station share the burden for checking orders. One works on Chodrow’s estimated 95 percent of orders not requiring review, and the other works on problem orders. It is a system, according to Chodrow, that “is working really well.”

Because of the increased efficiency and accuracy Chodrow’s staff experiences from using Workflow, he says, “Of all the programs, this was by far the best advancement. It fit into our practice model. You can quantify the results and the stress level is reduced.”

KPS Greensboro is one business in a system of 34 pharmacies that are a part of Kindred Healthcare, based in Louisville, Ky.

10 Prepare for Delivery



9 Tote Barcode Check



8 Pharmacist Check



6 NDC Barcode Check



7 Product Barcode Check



Going Paperless



Paperless pharmacies. New online options. Don't be left behind the stacks of files.

"It is getting too expensive to hold out," warns Dick Bradley, Pharmacy Director for QS/1. He says that budgeting for the manpower required to perform manual claims, take orders and fill prescriptions dwarfs the cost of investing in modern technological means of pharmacy operations. As just one example, Bradley estimates that handling an invoice is expensive in terms of sending the statement, receiving payment and spending employees' work hours on a single bill.

Turn the page to the future

There are ways to save the time and expense involved with the billing process. One such way is via electronic files. QS/1 has an agreement with VFI to send electronic files for statement processing. These statements reduce the necessary manpower for billing and also eliminate the excess paper files.

Online invoices also could reduce much of the cost involved in billing. For instance, QS/1 will soon be offering online invoices to its customers as an optional method of receiving bills. These statements should be available via the QS/1 web site as early as this summer. Online invoice payments offer an additional paperless function. But customers dependent upon a paper trail need not worry. "Like anything in a trial period, we will not stop sending paper invoices until we know for sure that the customer can access all information online," says Brent Thomasson, QS/1's Finance Manager.

There are many other new features in development at QS/1 that will aid in the goal of reducing paper and increasing efficiency. The first of these features is document scanning. "What we are looking at is a way for customers to scan documents – HIPAA forms, insurance cards, store faxes, HME documents, etc. – to be able to store more information on their computers as a means to a smoother business system," says Tammy Devine, Vice President of QS/1.

Chuck Gordon, QS/1 Market Analyst, agrees that document scanning is a step in the direction of cost-saving and convenience. "The ability to scan documents into our system, such as face sheets, will be immensely helpful. What we want to do is scan onto the patient record to have readily accessible electronic file," says Gordon.

There are special incentives for institutional pharmacies to scan documents. "On the institutional side, in the nursing home setting or in nursing home pharmacies, employees are constantly scanning orders. A doctor may write ten orders per page. To be able to scan those and attach them to a prescription is a huge advantage," says Gordon. Another big arena for document scanning is in HME. SystemOne, QS/1's software product for HME providers, will be greatly enhanced with scanning technology. "Our implementation will enable customers to electronically store all related documents," says Duane Ridenour, QS/1 Market Analyst. "There are tons of possibilities: delivery tickets, physician orders, insurance cards, release of information forms, proof of privacy notice, etc. The nice thing is that document scanning allows for convenient off-site storage of original documents." This newfound freedom for document storage especially will benefit HME providers since they are required to keep HME paperwork for seven years.

Prescription transfers will soon be legal. Currently, for example, South Carolina law limits prescription transfers for a customer within the state to a one-time use. This law excludes controlled drugs but is similar to laws in other U.S. states.

Required forms may move online as well. Smith Drug Company, a sister company of QS/1 in the J M Smith Corporation, is developing a process for creating and maintaining Schedule 2 scripts and Form 222 paperwork online. Currently the three-part forms provide copies for the pharmacy, the wholesaler and the DEA. The proposed online version would allow access for all required parties via the Internet. An encrypted Form 222 could be used to order narcotics safely and quickly.

Here and Now

Recent changes in the pharmacy marketplace have already prompted changes within pharmacies. The need to manage an increasing influx of pharmacy customers and the priority of patient safety have led to technological tricks of the trade. QS/1 offers several means of decreasing the buildup of paper forms in pharmacies.

Scanning capabilities are in place with NRx so that pharmacies can scan doctors' prescriptions. "The most prominent reason for document scanning and paperless information is the safety factor," says John Frady, QS/1 Market Analyst. Patient safety is a huge factor prompting paperless methods, because with scanned prescriptions, pharmacy employees can access a view of the hard copy for each prescription refill. Currently, the system will accommodate other scanned documents from the prescription record, but plans are underway to tie scanned documents to a profile or to the patient record. "The main factor is to prevent medication errors because you can access the prescription with each refill," explains Frady.


Another form of scanning uses barcodes to check prescription accuracy. Barcode checks with handheld scanners are another means of making a safer public. Quality assurance checking in Workflow (an add-on feature for RxCare Plus, NRx and PrimeCare) contains an option for NDC checking: prescription filled is compared to the label printed, is checked against medication in the vial, rechecked by a pharmacist, scanned for NDC # from bottle for verification. This process leads to the reassurance that the pharmacist puts the correct medication in the vial for every script.

Electronic signature pads that work in tandem with the pharmacy and point-of-sale software systems also reduce the number of forms floating in file cabinets. "Pharmacies have to offer patient counseling. The use of signature pads gives pharmacists more time to talk to patients and is a real advantage for OBRA 90 and HIPAA," says Bradley. The biggest benefit of storing the patient's signature electronically rather than as a hard copy for both OBRA 90 and HIPAA is a steep reduction in bookkeeping time and physical storage.

Third party reconciliation is another area in which pharmacies can save a lot of paper pushing. According to Bradley, "Pharmacies do business with at least 50 third parties. More and more are buying into electronic reconciliation for third parties. The work that can take as much as 30 hours per week if done manually takes only seconds electronically. And you know you will be paid properly."

E-prescribing, having doctors send prescriptions to pharmacies electronically, is available now but is an optional function. Gordon says that "e-prescribing in





general will reduce paper trails” because it eliminates the need of a paper script and reduces the steps required to enter a new prescription into the software system.

If increased efficiency is not enough motivation for some pharmacies to employ e-prescribing, consider the fact that in January 2006 the Medicare Prescription Drug Program will be requiring that pharmacies offer e-prescribing for its patients. According to Bradley, the current administration recognizes the chances that exist for mistakes and is making an effort to safeguard against some of the potential for error. The e-prescribing process is cheaper and offers fewer opportunities for errors. “E-prescribing is and will remain the patient’s choice. Everything required on a written doctor’s prescription is required on e-prescriptions. That includes doctor’s name and address, patient’s name and address, etc.,” Bradley says. “There are many safeguards involved with e-prescribing, even more than with paper prescriptions, but pharmacists still must use professional judgment and check every order.”

Refills also can be checked from the original bottle’s prescription number, as compared to a prescription scan. In addition to being safer, this scanning process is an easier way to do refills and requires less paper shuffling to locate the necessary information.

Web access updates are just another way to eliminate unnecessary paper pile-ups. Service Packs are available with Release 18.1 and minimize the need for mailed disks or CDs. Simply clicking for updates on the menu icon activates the installation of software updates, and the upgrade happens in the background while the system is working. “In busy pharmacies, it is easy for CD envelopes to get buried between pharmacy magazines,” says Bradley. DVD updates requiring only one piece of media combined with the fact that DVD updates are comprehensive and do not require the switching of disks necessary with the CD updates prevents the concern that important updates are lost in the shuffle of day-to-day operations.

Final Focus

One very important piece of information to remember is that regulations require that records be kept for every prescription for two years from the last refill. This law applies to both hard copies and electronic copies of prescriptions and may vary from state to state. HME regulations are even stricter, requiring seven years of preserved paper trails for each patient.

Looking at the issue from all sides, the move to an entirely paperless pharmacy is clearly on the horizon.

“Even if pharmacies get no new customers, prescription volume will still increase. To not take advantage of new technology will make the jobs of pharmacists and pharmacy technicians overwhelming. You can’t add enough people to offset the benefits of operating electronically,” predicts Bradley.

by Kathryn Hix, Creative Services Technician, QS/1

NRx & CMS: Centralized Profiles

by Rich Muller, National Sales Manager, QS/1

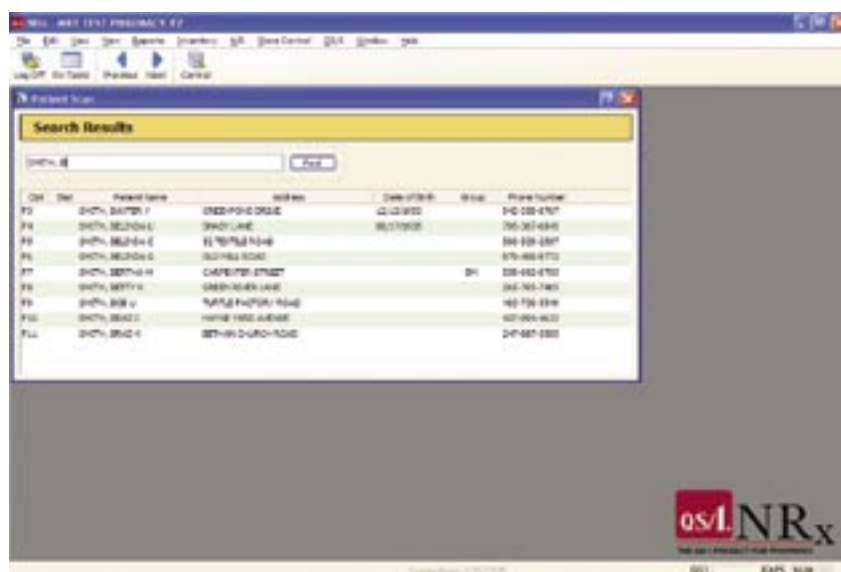
NRx opens new opportunities for creating additional modules to better serve QS/1 customers with multiple pharmacies. One such innovation is the Centralized Profiles Module. This module provides some powerful tools to better connect your pharmacies together to manage your patients and their medications.

Host-remote customers are already somewhat familiar with this concept. Using a centralized database, patient information is easily retrievable between pharmacies, and their profile information is available as well. However, host-remote is limited to ten pharmacies and requires all pharmacies to reside on the same physical machine, so there are limitations.

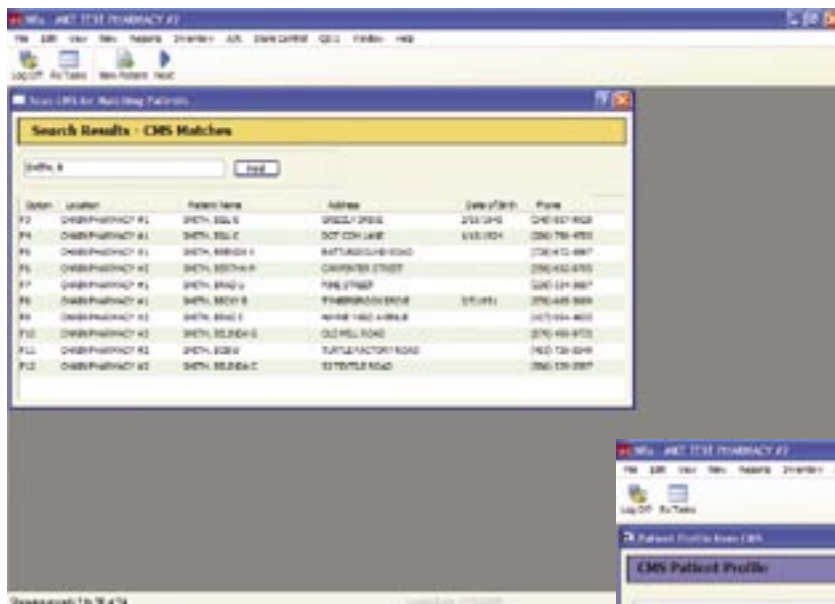
Similarly, CMS customers also are well aware that they have a central repository of all information, including patients and profiles. The Central Management System collects data from each commonly owned pharmacy each night as part of the daily audit process. Included in this information is the prescription and transaction history, including details of the patient, drug, doctor as well as price plan or third party. Since CMS does not require all pharmacies to be on the same physical server, an opportunity existed to use its power to serve customers with as little as two or as many as two thousand pharmacies.

With the Centralized Profiles Module enabled, a pharmacist simply can ask, "Have you been to any of our pharmacies before?" instead of, "Have you been to this pharmacy before?" If the customer indicates he has been to another pharmacy, the NRx system will actually be able to get

patient information directly from CMS. When looking up a patient, local matches, or matches to patients in the pharmacy you are working from, are returned first. This method ensures that the pharmacist or technician has first verified the patient does not exist at your location.



You'll note in the screen above that there is no "New Patient" button but instead a "Central" button. With Centralized Profiles activated, patients cannot be added without checking the central database first (unless the central database is unavailable). When the "Central" button is pressed, a list of matches is returned from the CMS system to NRx. You'll notice [in the screen below] there is a location field added to the selection screen to indicate the pharmacy where that patient is located. Once selected, a confirmation box is presented to confirm that this patient is to be added to the local pharmacy before completing the process. Patient information is then brought down from CMS to the pharmacy so the patient can be added without additional keystrokes.



Finally, Centralized Profiles also provides for a centralized interaction check, or as some call it, central DUR. NRx obtains prescription history from CMS to check for duplicate therapies or drug interactions, and they are reported as if these prescriptions were filled at your local pharmacy.

The process of refilling prescriptions is similar. When choosing to view the patient's profile (by pressing F3 or pressing the "Profile" button), the local profile, or prescriptions filled at this pharmacy, is returned. If the prescription is not on the local profile, then clicking on the "Central" button will return a list of profiles that are on the CMS central profile. Again, a location indicator is provided to show which pharmacy filled the prescription initially. When the pharmacist or technician chooses the script, a confirmation box is provided to confirm the transfer of the script (if allowable). Prescription information is then brought down from CMS to the pharmacy and is treated similarly to an electronic prescription, allowing the customer to easily re-key the prescription information. Upon completion of the filling process, the transfer is completed, and the original pharmacy is sent a message from CMS indicating the prescription has been transferred.

There are additional tools provided within CMS to combine patient records between stores. This is important where patients have been in multiple pharmacies but are separate records within CMS. This tool allows you to find patients who most likely match and allow a trained eye to accurately combine patient records, allowing centralized profiles to be accessible.

The Centralized Profiles Module is only available with the NRx pharmacy management system. It also requires CMS, or the Centralized Management System. For more information about this module, please contact your sales representative or call QS/1 Marketing at 1.800.845.7558.

Speaking One Language

New computers consolidate with USB ports

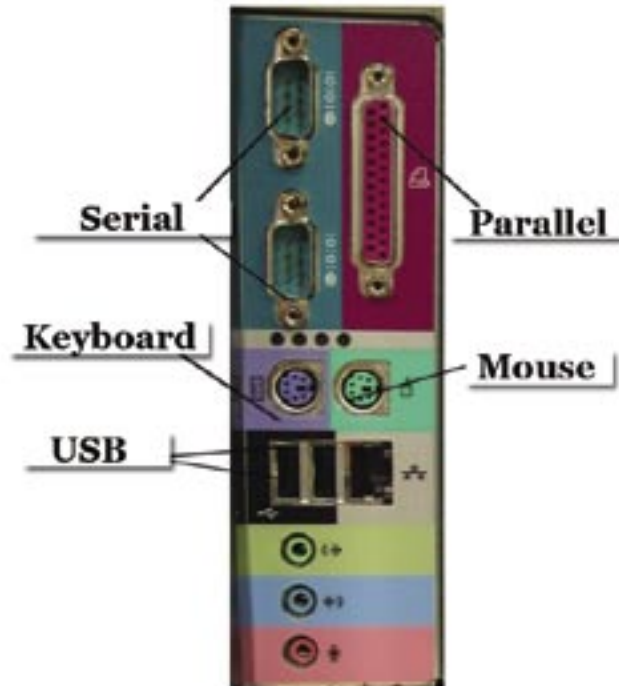
by Beverly Knight, Staff Writer, QS/1

If there is one truism with regard to technology, it's that change is constant. One change that is becoming increasingly important to understand is the movement away from PS/2, serial and parallel ports in favor of USB ports for connecting peripherals to computers.

The PS/2 port was developed by IBM to interface keyboards and pointing devices. The serial port has often been used for things such as modems, and parallel ports are most often associated with printers. But new computers have USB (Universal Serial Bus) ports along with these so called legacy ports. And often the number of these legacy ports is limited or some may not be present at all.

With the move to USB ports, most computer peripherals such as printers, modems, keyboards and mice utilize this new type of connection, or USB is at least an available option. Being able to visually recognize the differences in these ports is essential when choosing to upgrade a computer. It's important to make sure that there are enough of the right kinds of ports so that you can plug in all of these peripheral devices.

The advantage of the USB port, featuring one "universal" plug type for all USB peripheral-to-PC connections, is obvious. USB solves the confusion of connecting peripherals to the computer by using one standard plug-in. There is no device specific port. Plug it in anywhere a port is available becomes the rule. It is even possible to link one USB product to another in an ongoing chain.



Thus the number of USB peripherals connected to the computer can outnumber the USB ports. It is not even necessary to shut down and restart the PC to attach or remove a peripheral. When the peripheral is plugged in, the PC automatically detects it and starts up the installation software.

Sonny Anderson, Director of Systems and Technology for QS/1, emphasized that "QS/1 is moving to USB ports to keep up with the changing hardware, especially now that new computers have five or six USB ports and often come equipped with a USB keyboard and mouse as standard."

Another major impetus for the move to USB ports has been the introduction of Windows XP, which prints much more efficiently over the USB port than the parallel port. In fact, QS/1 sells a USB-to-parallel printer cable converter for those customers who need it.

Change, even positive change, presents challenges, especially when customers order new hardware. According to Anderson, there can be issues when mixing an old computer with new hardware.

"It's important to know how many serial, parallel and USB ports you will need on that new computer," Anderson said. "If you order a mag stripe reader, bar code scanner or signature capture pad, these devices interface through the keyboard port so you will need to know your keyboard type when placing that upgrade order."

Is RECONCILIATION causing you a HEADACHE?

If you are spending valuable time poring over remittance notices, looking for underpaid and non-paid claims or just banking the check and hoping you were paid correctly, FamilyCare's reconciliation service is available to assist you. With minimal investment, FamilyCare's Reconciliation will not only help you manage your third party Accounts Receivable but also will provide detailed remittance advice including line-by-line detail of each claim. This new reconciliation service can significantly reduce the time spent tracking pharmacy claims and can dramatically increase your pharmacy's profits.

Those of you who perform monthly reconciliation understand the time involved with manual posting, and time equates to dollars for the employee (salary, benefits, etc.). More likely than not, that employee has other responsibilities in the pharmacy. With over 23 percent growth in members' participation in the first quarter of the 2005 fiscal year, figures show manual posting can be reduced by as much as 75 percent - 80 percent for third party claims. As other processors make electronic remittance advice available, we will see percentages grow in all regions of the country.

This service provides the following reports: Non-Payment Report (claims that have had no activity in the current or previous billing cycle), Exceptions Report (claims that we reconciled but were paid differently than what was adjudicated) and Detail Report (similar to a paper remittance with the addition of amount adjudicated). These reports can be printed, downloaded and saved in Excel for future reference and analysis.

FamilyCare is currently receiving electronic remittance from AdvancePCS, CareMark, Express Scripts, Medimpact, Medco Health, First Health and TriCare. Other companies will be added as demand increases.

With the cost for this service at only five cents per adjudicated claim (an average investment of less than \$100 per month), the recovery of just a few non-paid claims can offset the cost. To receive an enrollment package or request additional information about this valuable service, please contact FamilyCare support at 1.800.845.7558, ext. 1471.

by Randy Burnett, Healthcare Services Supervisor, QS/1



Increasing Patient Compliance

by Dan Gerst, Marketing Operations Manager, QS/1

According to the American Pharmacists Association, "Approximately 40% of nursing home admissions, 11% of hospital admissions and 125,000 deaths annually are due to a lack of adherence with medication therapy." According to the Consumer Health Information Corporation, "nearly 30% of all refillable prescriptions are never filled." And according to the Task Force for Noncompliance, "Unfilled prescriptions have been estimated to result in a shortfall of about 140 million prescriptions annually, worth about \$2.8 billion." Given the magnitude of this problem, pharmacists may ask themselves, what can I do to help my patients take better care of themselves?

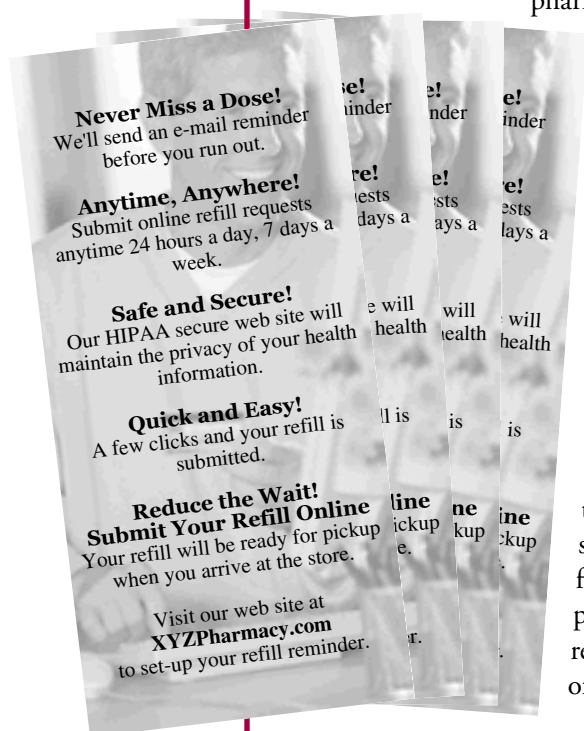
A pharmacy web site can help to increase patient compliance by encouraging patients to have their prescriptions refilled on time. CornerDrugstore can provide a pharmacy web site that automatically sends patients e-mail reminders on the date they should refill their prescriptions.

CornerDrugstore also has developed a flyer to include in every new prescription bag encouraging pharmacy patients to begin receiving these prescription refill reminders via e-mail. This flyer describes how to access the pharmacy's web site and register to receive these reminders.

A unique web site address (ex. www.abcpharmacy.com) will allow patients to bookmark and quickly access the pharmacy web site, increase web site traffic, enhance name recognition and strengthen customer loyalty. A specific pharmacy URL also can eliminate the steps involved in searching for a web site from the CornerDrugstore Directory and thereby reduce patients' exposure to competitors. Just contact CornerDrugstore and request your own unique web site address. Act promptly to take advantage of this offer before the best web site addresses are taken.

Act now and CornerDrugstore will register a unique web site address (URL) and deliver 5,000 5.5" x 2.83" flyers printed on glossy white paper free of charge. This offer is not available to existing CornerDrugstore customers; it is only available to QS/1 pharmacy customers through May 2005. Having a unique pharmacy web site is a small price to pay for the potential 30% increase in prescription volume.

To request a pharmacy web site with a unique URL and a free initial supply of flyers printed with the pharmacy web address, call 1.800.559.5489.

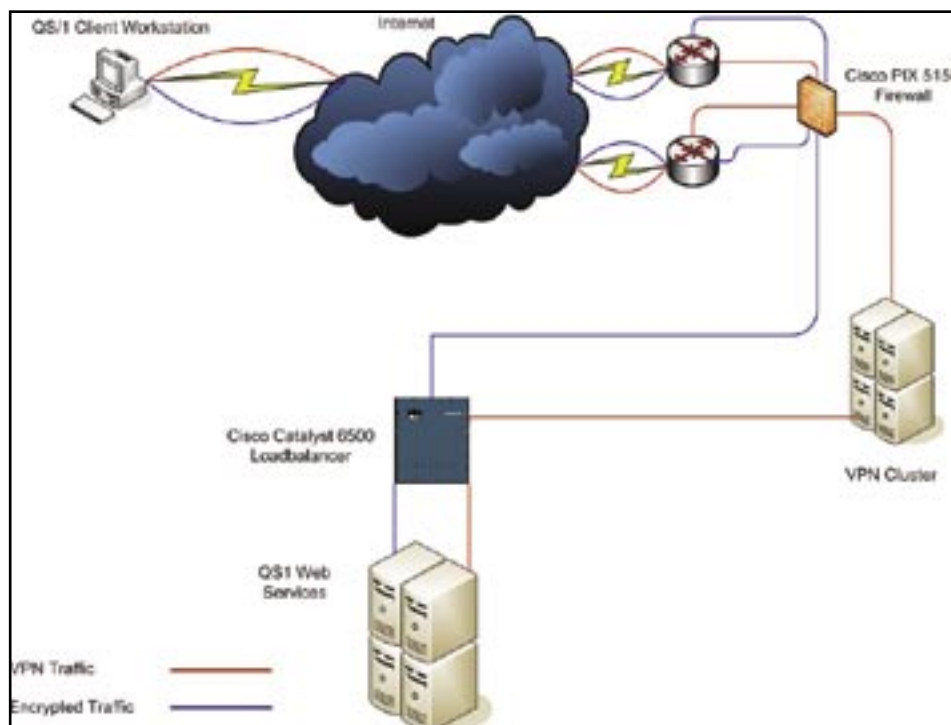


VPN Replacement Establishes More Reliable Network Connectivity

QS/1 customers who have made the move to the Internet for their QS/1 services and have converted to Release 18.1 are now connecting to QS/1 utilizing new technology.

Prior to Release 18.1, customers had to establish a VPN (Virtual Private Network) connection to QS/1 in order to utilize the Internet for such things as claims submission, price updates, program updates or ASP. QS/1's VPN connection allowed customers to connect in a secure manner to a remote server using the public Internet, making the connection "private" even though it is over a public network. The privacy is provided by the fact that all data transferred over the connection is encrypted and rendered unreadable by anyone other than the two connected parties. QS/1 moved away from VPN usage by implementing its own software based encryption method that replaced the need for the encryption provided by VPNs.

Now, with a VPN connection no longer a requirement for delivery of QS/1 services, the VPN replacement that is part of Release 18.1 will provide more reliable services. Since it is no longer necessary to create VPN tunnels with their multiple networking protocols, there is less to go wrong as the connection between QS/1 and its customers becomes less susceptible to the differences between Internet service providers and how they manage their networks and services to their subscribers.



"If customers are using our Internet services, they are moving to our VPN replacement as part of the Release 18.1 conversion. The process should be transparent to them," Sonny Anderson, QS/1's Director of Systems and Technology, explained about the improvements that he calls a significant upgrade in service.

One simple difference that many customers may notice between the VPN replacement and prior use of VPN servers is that the need to power on and off their cable/DSL modems first thing in the morning is no longer necessary.

"The big benefit," Anderson explained of the software level encryption, "is just the inherent reliability of keeping your solutions as simple as possible." Think of it as a machine with fewer moving parts.

by Beverly Knight, Staff Writer, QS/1



July 20-24

**RLANDO
2005**

Wednesday, July 20, 2005

Registration: 1:00 p.m. - 5:00 p.m.

Character Dinner: 6:30 p.m. - 8:00 p.m.

Thursday, July 21, 2005

Hardware Expo Hours: 1:00 p.m. - 5:00 p.m.

7:30 a.m. - 8:15 a.m. Registration & Continental Breakfast
8:15 a.m. - 8:30 a.m. Welcome & Introductions

8:30 a.m. - 10:00 a.m. – Technology Update (3 hr. CE) *Bill Felkey*

10:30 a.m. - 12:00 p.m. – Technology Update (Cont.) *Bill Felkey*

12:00 p.m. - 1:00 p.m. Luncheon (10:00 a.m. - 10:30 a.m. Coffee Break)

RxCare Plus	CRx	HME	PrimeCare
1:00 p.m. - 2:00 p.m. NRx Update	1:00 p.m. - 2:00 p.m. CRx Enhancements	1:00 pm - 2:00 pm Transfer and Bill Scripts	1:00 p.m. - 2:00 p.m. Release 18.1 Review
2:00 p.m. - 3:00 p.m. RxCare Plus Enhancements	2:00 p.m. - 3:00 p.m. NRx Update	2:00 pm - 3:00 pm Pending Orders	2:00 p.m. - 3:00 p.m. Reports, Custom Reports, and Data Export

Friday, July 22, 2005

Hardware Expo Hours: 1:00 p.m. - 5:00 p.m.

7:30 a.m. - 8:15 a.m. Registration & Continental Breakfast
8:15 a.m. - 8:30 a.m. Welcome & Announcements

8:30 a.m. - 9:30 a.m. – NSC, NPI, & Accreditation (1 hr. CE) *Andrea Stark*

10:00 a.m. - 12:00 p.m. – Front End Profit Center (2 hr. CE) *Jack Evans*

PrimeCare

10:00 a.m. - 12:00 p.m.
Billing Matrix, A/R, Reports

12:00 p.m. - 1:00 p.m. Luncheon (9:30 a.m. - 10:00 a.m. Coffee Break)

RxCare Plus	CRx	HME	PrimeCare
1:00 p.m. - 2:00 p.m. QS/1 Point-of-Sale	1:00 p.m. - 2:00 p.m. QS/1 Point-of-Sale	1:00 p.m. - 2:00 p.m. QS/1 Point-of-Sale	1:00 p.m. - 2:00 p.m. Fill List Setup and Review
2:00 p.m. - 3:00 p.m. RxCare Plus Enhancements	2:00 p.m. - 3:00 p.m. Security	2:00 p.m. - 3:00 p.m. Pending Orders	2:00 p.m. - 3:00 p.m. Miscellaneous Topics

Saturday, July 23, 2005

Hardware Expo Hours: 1:00 p.m. - 5:00 p.m.

7:30 a.m. - 8:15 a.m. Registration & Continental Breakfast
8:15 a.m. - 8:30 a.m. Welcome & Announcements

8:30 a.m. - 10:00 a.m. – Medicare Part D Panel Presentation (1.5 hr. CE) *Jim Hancock, Moderator*

10:30 a.m. - 12:00 p.m. – Workflow Panel (1.5 hr. CE)
John Frady, Moderator

10:30 a.m. - 12:00 p.m. (HME) – Target Referral (1.5 hr. CE)
Jack Evans

12:00 p.m. - 1:00 p.m. Luncheon (10:00 a.m. - 10:30 a.m. Coffee Break)

RxCare Plus	CRx	HME	PrimeCare
1:00 p.m. - 2:00 p.m. Reconciliation and Security Journals	1:00 p.m. - 2:00 p.m. Interfaces & Work Queue	1:00 p.m. - 2:00 p.m. Management Reports and How to Read Them	1:00 p.m. - 2:00 p.m. Release 18.1 Review
2:00 p.m. - 3:00 p.m. Tickler File	2:00 p.m. - 3:00 p.m. Miscellaneous Topics	2:00 p.m. - 3:00 p.m. Daily, Weekly, Monthly Procedures	2:00 p.m. - 3:00 p.m. Reports, Custom Reports, and Data Export

Sunday July 24: Breakfast with QS/1 Staff 8:00 a.m. - 9:00 a.m.

All Products

RxCare Plus
CRx
CMS
Point-of-Sale
SystemOne
PrimeCare



4 Easy Ways to Register

- 1- Online: www.qs1.com
- 2- Fax: 1.800.231.7783
- 3- Phone: 1.800.845.7558 ext.7253
- 4- Mail: Attn: Customer Conference
P.O. Box 6052
Spartanburg, SC 29304

For Hotel Reservations Call...

Disney Contemporary Resort

\$159.00/night

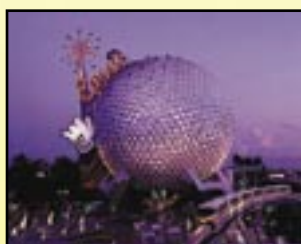
Group Reservations – 1.407.824.3869

Ask for the QS/1 Data Systems Rate



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Go to www.qs1.com for Walt Disney World® Theme Park advance ticket information! You can purchase your choice of Walt Disney World® Ticket packages at a special QS/1 Convention rate!



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Special QS/1 Event Wednesday, July 20th 6:30 p.m. - 8:00 p.m.

Join us for a Disney Character Dinner. Two of your favorite Disney friends will be present for Pictures. This is sure to be fun for the whole family! Tickets included with all conference registrations. Extra tickets are available: \$25.00/adult and \$15.00/child.

QS/1 Conference Fees

Full Registration w/ CE:
Full Registration w/No CE:

\$299/person
\$249/person

Spouse/Guest Registration:
Child's Registration:

\$199/person
\$99/person (under 18)

Full Registration Fee. Includes Character dinner, CE credits, general sessions, keynote speakers, workshops, vendor exhibits, continental breakfast and lunch each day.

Full Registration Fee with no CE Credit. Includes same as full registration except no CE credits.

Spouse Registration Fee. Includes scheduled meals, breaks and reception.

Child's Registration Fee. Same as spouse/guest.

Cancellation. If you cannot attend, a full refund will be made if the cancellation request is received in writing by July 1, 2005.

Check for agenda updates at www.qs1.com

CISP: Cardholder Information Security Program

by Vickie Patterson, Application Services Supervisor, QS/1



Due to the increasing number of credit card fraud cases and the rise of e-commerce, in June 2001 Visa implemented CISP (Cardholder Information Security Program) to minimize access to credit card data. Following in Visa's footsteps, each of the payment card companies implemented their own security requirements along the way which left merchants and vendors with the complexity of conforming to each payment card's security standards. Visa and MasterCard recognized the need for globalization of the standards for all card types, so they recently collaborated to design one set of standards acceptable for all payment cards. These new globalized security measures comprise the PCI (Payment Card Industry) Security Standard. The PCI Security Standard decreases the opportunity for others to obtain sensitive credit card information by limiting the amount of exposure, storage and access to credit card data. Thus, in turn, consumers will have a greater comfort level with credit cards transactions.

Tips for recognizing fraud and handling manual transactions are listed below. These lists and more information can be found at <http://usa.visa.com/business>.

Six Warning Signs of Fraud

Certain customer behavior could point to card fraud, but it doesn't necessarily indicate criminal activity. You know your customers, so let your instincts steer you in the right direction.

Watch out for customers who:

1. Purchase a large amount of merchandise without regard to size, style, color, or price.
2. Ask no questions on major purchases.
3. Try to distract or rush you during the sale.
4. Make purchases and leave the store, but then return to make more purchases.
5. Make large purchases just after the store's opening or as the store is closing.
6. Refuse free delivery for large items.

Handling Key-Entered Transactions

If a Visa card cannot be swiped, you must key-enter the card account data into your POS terminal.

When you key-enter a transaction, you run the risk of accepting a counterfeit card because the magnetic stripe information is unavailable.

1. Check the terminal. Be sure your terminal is working properly. If the terminal is okay and the problem appears to be with the magnetic stripe, continue to step 2.
2. Match the account number. Check to see that the embossed account number on the front of the card matches the number indent-printed on the back.
3. Check the expiration date. Look at the "good thru" or "valid thru" date to be sure the card hasn't expired. If the card has a "valid from" date, be sure the card isn't being used before it is valid.
4. Make an imprint. Get a manual imprint of the card.
5. Get a signature. Ask the customer to sign the imprinted sales draft.
6. Check the signature. Be sure that the signature on the card matches the one on the sales draft. Do not accept an unsigned card.



Service Packs

Service Packs are being delivered as scheduled with the upgrade to Release 18.1. Generally, these updates are available weekly. An icon at the bottom of the screen indicates when updates are ready to be installed, but a manual check for updates also is available from the QS/1 menu.

For optimal access to Service Pack updates, Internet access via broadband connection is recommended. A dial-up connection will work for updates, but the time frame necessary to perform the download will be greatly increased. Remember that the option to download the Service Pack updates to a separate computer, then building a CD to install updates is still a viable possibility.

To date, more than 600 customers have downloaded service packs.



QS/1 Phone Extensions

1.800.845.7558

Phone: 864.253.8600

Fax: 864.253.8690

Accounting	ext. 1404
Pharmacy Support	ext. 1406
PrimeCare Support	ext. 1407
PowerLine (FastClaim)	ext. 1408
HME Support	ext. 1409
POS Support	ext. 1410
Hardware Support	ext. 1411
Upgrades	ext. 1412
IVR Support	ext. 1421
Price Updates Support	ext. 1423
Marketing Support	ext. 1429
CornerDrugstore	ext. 1430



Point-of-Sale

Drawer Assignment

The Drawer Assignment option now can be used with a register with only one cash drawer. Using this option will limit access to single drawer registers to only the person authorized to operate that register.

To set this option, access New Password from POS Store Control Options and set the field to "Y." Next assign a cashier in the Operator 1 field in the Drawer Assignment function, to restrict access to that register's cash drawer to the assigned individual, and require that person to type a password for each transaction. It is important to note that leaving the Operator 1 field blank will continue to allow any cashier to sign in and operate the register.

An additional change to the Drawer Assignment option requires that an employee with Manager Access assign or reassign a cashier to a drawer.

New Fields

The Register Table now contains two new fields, Signature Capture ("Sig Cap") and Personal Identification Number Pad (PIN Pad). A "Y" in the Signature Capture field sets up the register to accept electronic signatures. A "Y" in the PIN Pad field defaults swiping debit and credit cards to the signature capture device; pressing ESC will reset the system to accept cards swiped through the card swiping device on the register when the cashier must swipe the card. It is important to remember that the PIN Pad must be encrypted by Heartland Payment Systems for debit card processing.

Important Reminder

As of Release 18.1, registers can perform only register functions. These workstations still can run transactions, create reports and perform A/R functions, but they no longer can access the pharmacy system.



PrimeCare

Release 18.1

Here are some highlights from the release notes and service packs since the last issue of *Insight*:

- Release 17.8 Added beeps to the Quality Assurance section of Workflow. There is a higher pitched beep for a successful NDC match and a lower pitched beep for a mismatched NDC.
- Release 18.1.5 adds Zebra 3844Z printer support. This model is the new small foot, print direct thermal printer that was demonstrated at the 2004 QS/1 Customer Conference in Baltimore.
- Release 18.1.6 adds an autoprint function in the Label/Dispense section of Workflow.
- Release 18.1.6 adds an option for NDC checking in the Label/Dispense section of Workflow instead of the Quality Assurance section.
- Release 18.1.7 adds pharmacist and technician security options for HOA Add and HOA Update.

E-Prescribing

It is well-known by now that ERx is in the Medicare Modernization Act. There is a proposed rule currently pending for comment on ERx. Comments are due by 4/5/5. The proposed rule specifies NCPDP Script as the standard for prescriptions. You can get more info at <http://www.cms.hhs.gov/medicarerereform/>

The proposed rule recognizes the two-way retail (doctor-pharmacy) model. There is little, if any, recognition of the three-way (doctor-facility-pharmacy) model that is necessary in LTC (long-term care). Remember that the government views ALF as being retail even though most of the healthcare world does not see it this way.

Comments submitted to CMS (Centers for Medicare & Medicaid Services) will raise the LTC three-way issue in hopes that CMS will address this weakness in the final regulations. Without CMS recognizing the uniqueness of the LTC ERx three-way transaction, it is doubtful that it can progress very far for nursing home patients.

Until the final regulations are released later this year, it is difficult to determine the outcome. QS/1 currently supports the NCPDP Script standard, and PrimeCare can accept ERx and refill authorizations from ProxyMed, WebMD and SureScripts.



WebRx

QS/1 announces WebRx, a new product that allows pharmacy customers to submit prescription refill requests online. This product is designed for pharmacies that are part of larger institutions, such as university health centers or hospital outpatient pharmacies that already have their own web sites. WebRx is an application that can be inserted into an existing web site that allows pharmacy patients to submit online prescription refills. It communicates directly to the QS/1 pharmacy management system, eliminating the data entry required when customers walk-in, simplifying the prescription filling process and improving the workflow of the pharmacy.

Refill requests submitted online can reduce medication errors and increase patient safety, as this information is verified in real-time before it is queued up with other prescription refill requests. The QS/1 system tracks how the order was submitted, the number of prescription refill requests still available and whether or not the physician needs to be contacted. If a prescription refill request fails the validation test, the patient and pharmacy are both notified. The failed transaction report can help to identify possible areas for improvement. In addition, WebRx offers other reports to help the pharmacy identify trends.



From the Support Center



Visit our web site at www.qs1.com and check out the Frequently Asked Questions section.

RxCare Plus

Picking up and installing Release 18.1 Service Updates

On the server, while RxCare Plus is still running, click the Windows Start button and select Programs, QS/1, Check for QS/1 Updates. If there is a new update available, a QS/1 icon will display in your system tray (bottom right of your monitor). If you click on the icon, a screen displays asking if you want to download the programs now or at a later time. Once you have downloaded the updates, the system will ask you if you want to install the updates now or later. Keep in mind that QS/1 will not continue to run while updates are installed.

PrimeCare

If you convert or pick up any new programs for physicians orders or MARS, be sure to update your control record options and verify that they are still answered correctly before trying to run your forms.

To update control record options, access F3-Facility/Unit Management, F13-Update Facility/Unit Control Record Options (for RxCare Plus: F-Nursing Home Processing, N-Update Nursing Home Control Record Options). To verify that the control record

options are correct, access F3-Facility Unit Management > F9-Facility/Unit Record Management (for RxCare Plus: F-Nursing Home Processing > I-Control Record Maintenance), access your facility then tab to the appropriate form and press Enter. If you have any questions about what a field means, the definitions are available on our web site (www.qs1.com).

Point-of-Sale

POS Release 18.1 can process gift cards. Following is the contact information for purchasing gift cards and preferred shopper cards:

Lisa Seyedein
Smith Premier Services
Spartan Centre, Suite 303
Post Office Box 5824
Spartanburg, SC 29304
(800) 247-4526; (864) 591-0025
(864) 582-0819 Fax

Dave Stevens
FGI Print Management
1050 S. E. Republican
Topeka, KS 66607-1612
(800) 340-3676; (785) 235-8844
(785) 235-8833 Fax

Viki Robinette
Metropolitan Card Solutions
106 Spencer Lane
Hickory, NC 28601
(828) 495-2067
(828) 495-2546 Fax

Arthur Blank & Co., Inc.
225 Rivermoor Street
Boston, MA 02132
(800) 776-7333; (617) 325-9600;
(617) 327-1235

CRx Release 18.1

Did you know that you can now search by Bin Number for Third Parties?

Menu Path

4 -- File Maintenance

7 -- Third Party

2 -- Online Setup

Enter * to search by Bin.

If you need assistance, call Customer Support at 1.800.441.1995 and select option 2 for Software Support.

Central Management System

Did you know that in Release 17.8 you have the ability to set up Security within CMS?

From CMS Menu Bar

Select Tools

Select Central Management Security

You can now add a user and choose level of access for each.

If you need assistance, call Customer Support at 1.800.441.1995 and select option 3 for CMS Chain Support.

CRx Hardware

Backup

Please be aware of automatic backup failures that occur on all versions of Windows after the Daylight Savings time change. Check your backup logs daily. If you experience any problems with your automatic backups, call Customer Support 1.800.441.1995 and select option 4 for Hardware.

Norton Antivirus

Check your Subscription Date to ensure it is not expired. If it is expired and you have Internet access, update your program to ensure that it checks for the most current virus definitions and that Automatic Live Updates is activated. If you do not have Internet access, contact Symantec for the update.

IN YOUR AREA

Training Seminars

Mid-Atlantic Region:

Indianapolis, IN (800) 637-5251

04/07/2005 PrimeCare: A/R
04/21/2005 RxCare Plus: Release 18.1 Overview
05/12/2005 SystemOne: Release 18.1 Overview
05/17/2005 RxCare Plus: Release 18.1 Overview
06/09/2005 RxCare Plus: A/R & Reconciliation
06/16/2005 RxCare Plus: Workflow

Lexington, KY (866) 441-7011

04/19/2005 RxCare Plus: Release 18.1 Overview
05/12/2005 RxCare Plus: Release 18.1 Overview
05/19/2005 RxCare Plus: Workflow

Richmond, VA (877) 392-5851

04/19/2005 RxCare Plus: Release 18.1 Overview
04/21/2005 CRx: Release 18.1 Overview
05/10/2005 RxCare Plus: Reporting
05/19/2005 PrimeCare: Release 18.1 Overview
06/14/2005 SystemOne: Release 18.1 Overview

Midwest Region:

St. Paul, MN (800) 541-5358

04/26/2005 RxCare Plus: Basic Prescription Processing
04/27/2005 RxCare Plus: A/R
04/28/2005 RxCare Plus: Inventory/Online Drug Reorder
05/10/2005 SystemOne: Release 18.1 Enhancements
06/14/2005 SystemOne: Release 18.1 Enhancements

Pleasant Hill, MO (800) 541-5358

05/17/2005 RxCare Plus/PrimeCare: Drug Inventory
05/18/2005 RxCare Plus/PrimeCare: Release 18.1 Enhancements
05/19/2005 RxCare Plus/PrimeCare: Report Logic and Data Export

Southeast Region:

Spartanburg, SC (800) 889-9183

04/07/2005 RxCare Plus: Release 18.1 Enhancements
04/14/2005 Point-of-Sale: Release 18.1 Enhancements
04/21/2005 SystemOne Release 18.1 Enhancements
05/12/2005 RxCare Plus: A/R
05/19/2005 Point-of-Sale: Inventory
05/26/2005 SystemOne: Release 18.1 GUI
06/09/2005 RxCare Plus: Workflow
06/19/2005 Point-of-Sale: Basic Processing
06/23/2005 SystemOne: Release 18.1 Enhancements

Miami, FL (800) 889-9183

05/12/2005 RxCare Plus: A/R
05/19/2005 Point-of-Sale: Inventory
05/26/2005 SystemOne: Release 18.1 GUI

Orlando, FL (800) 889-9183

04/07/2005 RxCare Plus: Release 18.1 Enhancements
04/14/2005 Point-of-Sale: Release 18.1 Enhancements
04/21/2005 SystemOne: Release 18.1 Enhancements
05/11/2005 PrimeCare: Facility & Patient Billing Matrix
06/09/2005 RxCare Plus: Workflow
06/16/2005 Point-of-Sale: Basic Processing
06/23/2005 SystemOne: Basic Enhancements

Gulf States Region:

Dallas, TX (800) 248-0096

04/19/2005 RxCare Plus: Release 18.1 Review & Enhancements
04/19/2005 Point-of-Sale: Release 18.1 Review & Enhancements
05/24/2005 RxCare Plus: Release 18.1 Review & Enhancements
05/24/2005 Point-of-Sale: Release 18.1 Review & Enhancements
06/21/2005 Point-of-Sale: Release 18.1 Review & Enhancements
06/21/2005 RxCare Plus: Release 18.1 Review & Enhancements

Brandon, MS (800) 248-0096

04/26/2005 RxCare Plus: Release 18.1 Review & Enhancements
04/26/2005 Point-of-Sale: Release 18.1 Review & Enhancements
05/31/2005 RxCare Plus: Release 18.1 Review & Enhancements
05/31/2005 Point-of-Sale: Release 18.1 Review & Enhancements
06/28/2005 RxCare Plus: Release 18.1 Review & Enhancements
06/28/2005 Point-of-Sale: Release 18.1 Review & Enhancements

Houston, TX (800) 248-0096

05/10/2005 RxCare Plus: Release 18.1 Review & Enhancements
05/10/2005 Point-of-Sale: Release 18.1 Review & Enhancements
06/14/2005 RxCare Plus: Release 18.1 Review & Enhancements
06/14/2005 Point-of-Sale: Release 18.1 Review & Enhancements

Little Rock, AR (800) 233-6204

05/03/2005 RxCare Plus: Release 18.1 Review & Enhancements
05/03/2005 Point-of-Sale: Release 18.1 Review & Enhancements

Denver, CO (800) 248-0096

05/17/2005 RxCare Plus: Release 18.1 Review & Enhancements
05/18/2005 PrimeCare: Release 18.1 Review & Enhancements

Northeast Region:

Sturbridge, MA (800) 648-7428

04/05/2005 RxCare Plus: Release 18.1 Enhancements & Review
04/21/2005 PrimeCare: Billing Matrix
05/03/2005 SystemOne: Basic Processing
05/19/2005 PrimeCare: Basic Processing
06/09/2005 Point-of-Sale: Basic Processing
06/16/2005 PrimeCare: Release 18.1 Enhancements

Mechanicsburg, PA (717) 795-2700

04/12/2005 RxCare Plus: Release 18.1 Enhancements & Review
04/21/2005 PrimeCare: General & Custom Reporting
05/10/2005 Point-of-Sale: Release 18.1 Enhancements & Review
05/19/2005 PrimeCare: Release 18.1 Enhancements & Review
06/07/2005 CRx: Basic Processing & Review

West Coast Region:

Seattle, WA (866) 848-1942

04/05/2005 RxCare Plus: Tickler File Training
05/16/2005 RxCare Plus: Prescription Processing 101
05/20/2005 RxCare Plus: Report Logic
06/06/2005 RxCare Plus: Prescription Processing 101
06/07/2005 RxCare Plus: Inventory Control

Valencia, CA (866) 848-1942

04/11/2005 RxCare Plus: A/R & Third Party Reconciliation
04/28/2005 SystemOne GUI: Report Logic
05/03/2005 RxCare Plus: California Medi-Cal Training
05/04/2005 PrimeCare: Patient & Facility Billing Matrix
05/05/2005 PrimeCare: Successful Use of Fill Lists
05/10/2005 RxCare Plus: Prescription Processing 101
06/13/2005 RxCare Plus: Prescription Processing 101
06/17/2005 RxCare Plus: Tickler File Training
06/23/2005 SystemOne: Claims Follow Up Procedures

\$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

Orlando, FL

April 1-5, 2005:
American Pharmacists Association

Nashville, TN

April 4-6, 2005:
Tennessee Association for Home Care, Inc.

Las Vegas, NV

April 5-7, 2005:
MedTrade Spring

Austin, TX

April 7-11, 2005:
Texas Society of Health-System Pharmacists

Waikiki Beach, HI

April 8-9, 2005:
Hawaii Pharmacy Association Convention

New Orleans, LA

April 10-12, 2005:
FMI Supermarket Pharmacy Conference

Columbus, OH

April 15-17, 2005:
Ohio Pharmacists Association

Portland, OR

April 19-20, 2005:
Pacific Association for Medical Equipment Services

North Myrtle Beach, SC

May 5-6, 2005:
South Carolina Medical Equipment Services Association

Tarrytown, NY

May 9-11, 2005:
New York Medical Equipment Providers Association

State College, PA

May 15-17, 2005:
Pennsylvania Association of Medical Suppliers/Delaware

Orlando, FL

May 16-18, 2005:
American Society of Consultant Pharmacists

San Diego, CA

May 31-June 4, 2005:
American College Health Association

Waterloo, IA

May 31-June 3, 2005:
VGM Heartland Conference

Coeur d'alene, ID

June 9-12, 2005:
Tri-State Pharmacy Convention

Amelia Island, FL

June 11-13, 2005:
Georgia Pharmacy Association

Orange Beach, AL

June 12-15, 2005:
Tri-State HME Conference

Galloway, NJ

June 16-18, 2005:
American Society for Automation in Pharmacy - ASAP

Phoenix, AZ

June 16, 2005:
Arizona Medical Equipment Services Association

Cystic, CT

June 20-22, 2005:
New England Medical Equipment Dealers

Hot Springs, AR

June 23-24, 2005:
Arkansas Pharmacists Association

Myrtle Beach, SC

June 23-26, 2005:
South Carolina Pharmacy Association

Brainerd, MN

June 24-26, 2005:
Minnesota Pharmacists Association

Panama City Beach, FL

June 25-26, 2005:
Alabama Pharmacy Association

Destin, FL

June 27-28, 2005:
Mississippi Pharmacists Association



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

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