**PROSTHETICS
ADMINISTRATIVE HOME OXYGEN
MODULE**

USER MANUAL

Version 3.0

September 1999

Table of Contents

1. Introduction

Overview

The Administrative Home Oxygen Module is exclusively an administrative system. It provides for the recording of patient information for reporting and invoice billing which can be used as a check against bills received from the contractor for each patient. The module facilitates the coordination of services when contractors change at the end of a contract cycle. It also provides correspondence support to remind patients when they need to renew their Home Oxygen prescriptions.

The Administrative Home Oxygen module is mainly used to manage billing from the vendor, providing several benefits, including saving money by suspending erroneous charges and time by eliminating a manual review of the records. The module also provides information about the current prescription of the patient, and flags patients with special problems quickly.

Correspondence may be required by local VAMC Home Oxygen program policy. With this release, letters may be sent to patients when prescriptions are due to expire or when service is discontinued.

New Administrative Home Oxygen Options

Add/Edit Home Oxygen Patient: This option allows you to add patients to the Prosthetics Patient file and document home oxygen prescription data and the equipment that is to be used by the patient.

Inactivate/Activate Oxygen Patient: If the patient is no longer receiving home oxygen or treatment has been interrupted for an extended length of time, inactivate the patient using this option. The option allows you to record a date of inactivation and a coded reason for the inactivation. This option is also used to re-activate a patient. Reactivating the patient changes the Home Oxygen Activation Date for the patient.

Generate Letters: This option generates a list of patients that meet the criteria (number of days prior to prescription expiry) for receiving a letter.

Billing Transactions: This option allows you to edit bills for a specific month, accept those transactions, post and sign-off on them.

Reports:

> **Alphabetical List Home Oxygen Patients (by site)**: This is a listing of active home oxygen patients for a selected site. The report also shows the date the current prescription expires.

Active Home Oxygen Patients (Alpha by Zip Code): This is a listing of active patients with their address information.

Prescription Expiration Dates: This is a listing of active patients sorted by the expiration dates for their current prescriptions.

Inactive Home Oxygen Patients (by Inactive date): This is a listing of inactive patients and the reason they were inactivated.

Primary Item Report: This is a report of active patients listing the primary item, quantity of the item, and cost.

Monthly Home Oxygen Billing: This report lists billings for all active home oxygen patients.

New Patients: This is a report of all new patients for a selected date range.

Prescription Report: This report includes HCPCS/items, quantity, cost, extended cost, and the fund control point.

Pre-Billing Discrepancy Report: This report should be run and any discrepancies corrected prior to creating a billing list for a month. If there are any discrepancies for a patient, then that patient will not appear on the billing list.

Site Parameters Enter/Edit: This option is used to enter site specific information regarding default days to expiration for prescription, letters, vendors, and Fund Control Points.

Verify Posted Billing Transactions: This option posts all Home Oxygen billing transactions for a selected month for bills posted in IFCAP that were not also posted in Patient 2319 records. It will loop through all the records for the month and vendor entered.

Purchase Card Sign Off: Once a billing is accepted and posted, this option can be used to sign off on the billing.

List Manager Functions

List Manager is used in the Billing Transactions and Generate Letters options. Its functions provide the ability to move around between screens, search for selected pieces of information, and print the information on the screen(s). A list of the functions for each option can be obtained at the "Select ACTION" prompt by entering two question marks (??). The List Manager functions are shown in bold below.

```
Billing Transactions        Mar 04, 1999 14:19:56       Page:   1 of   29
Billing Transactions for PROSVENDOR,ONE
for FEB 1999
       NAME         SSN  EL PRIMARY ITEM           910   OTHER   SUSP   TOTAL
 1. PATIENT,ONE   0001  4  O2 TANK H SYSTEM      40.00    0.00   0.00    40.00
 2. PATIENT,TWO   0002  1  O2 CONCENTRATOR      325.00  300.00   0.00   625.00
 3. PATIENT,THREE 0003  4  O2 NEBULIZER/BUNN SYS 150.00    0.00   0.00   150.00
 4. PATIENT,FOUR  0004  4  O2 CONCENTRATOR      182.50    0.00   0.00   182.50
 5. PATIENT,FIVE  0005  4  O2 CONCENTRATOR      162.50   45.00   0.00   207.50
 6. PATIENT,SIX   0006  4  O2 CONCENTRATOR      162.50   90.00   0.00   252.50
 7. PATIENT,SEVEM 0007  4  O2 CONCENTRATOR      162.50   90.00   0.00   252.50
 8. PATIENT,EIGHT 0008  4  O2 CONCENTRATOR      182.50  330.00   0.00   512.50
 9. PATIENT,NINE  0009  4  O2 CONCENTRATOR      162.50   90.00   0.00   252.50
10. PATIENT,TEN   0010  4  O2 CONCENTRATOR      182.50  228.00   0.00   410.50
         Enter ?? for more actions
Select ACTION:Next Screen// ??

ET   Edit Patient          AP   Add Billing Patient  UB   Unaccept Billing
EB   Edit Billing          CV   Change View          XB   Post Billing
AB   Accept Billing        QE   Quick Edit
23   Display 2319          SO   Sign Off Purchase Card


The following actions are also available:
+    Next Screen           FS   First Screen         SL   Search List
-    Previous Screen       LS   Last Screen          ADPL Auto Display(On/Off)
UP   Up a Line             GO   Go to Page           QU   Quit
DN   Down a Line           RD   Re Display Screen
>    Shift View to Right   PS   Print Screen
<    Shift View to Left    PL   Print List
```

Next Screen: Enter + to move to the next screen.

Previous Screen: Enter - to go back to the previous screen.

Up a Line: (Not used in this version)

Down a Line: (Not used in this version)

Shift View to Right: (Not used in this version)

Shift View to Left: (Not used in this version)

First Screen: Enter FS to return to the first screen.

Last Screen: Enter LS to go forward to the final screen.

Go to Page: Enter GO to select the screen number you want to see.

Re Display Screen: Enter RD to re-display the screen.

Print Screen: Enter PS to get a device to print what you see on the screen.

Print List: Enter PL to get a device to print the data on the screen.

Search List: Enter SL to find a specific piece of information:
```
    Select ACTION:Quit// sl    SL
    Search for: OXYGEN

    Billing Transactions           Jul 12, 1999 11:02:32        Page:    1 of    1
    Billing Transactions for PROSVENDOR,TWO
    for JUN 1999
         NAME          SSN   EL PRIMARY ITEM             910    OTHER    SUSP    TOTAL
      1. PATIENT1,ONE   0001 4  PROSVENDOR, FOUR   1755.00    0.00    0.00 1755.00
      2. PATIENT1,two   0002 4  OXYGEN HOSE UNION    518.75    0.00    0.00  518.75
      3. PATIENT1,THREE 0003 4  PROSVENDOR, FOUR    320.00    0.00    0.00  320.00
      4. PATIENT1,FOUR  0004 4  OXYGEN               0.00 1000.00    0.00 1000.00
      5. PATIENT1,FIVE  0005 1  OXYGEN              90.00    0.00    0.00   90.00
      6. PATIENT1,SIX   0006 1  OXYGEN HOSE UNION   80.00    0.00    0.00   80.00
```
Your search criteria is highlighted on the screen.

Auto Display (On/Off): Enter ADPL to either display or hide the Letter or Billing actions you can take.
```
Billing Transactions             Mar 04, 1999 14:19:56        Page:    1 of   29
Billing Transactions for PROSVENDOR,ONE
for FEB 1999
      NAME         SSN   EL PRIMARY ITEM            910    OTHER    SUSP    TOTAL
 1. PATIENT,ONE   0001 4  O2 TANK H SYSTEM        40.00    0.00    0.00    40.00
 2. PATIENT,TWO   0002 1  O2 CONCENTRATOR        325.00  300.00    0.00   625.00
 3. PATIENT,THREE 0003 4  O2 NEBULIZER/BUNN SYS  150.00    0.00    0.00   150.00
 4. PATIENT,FOUR  0004 4  O2 CONCENTRATOR        182.50    0.00    0.00   182.50
 5. PATIENT,FIVE  0005 4  O2 CONCENTRATOR        162.50   45.00    0.00   207.50
 6. PATIENT,SIX   0006 4  O2 CONCENTRATOR        162.50   90.00    0.00   252.50
 7. PATIENT,SEVEN 0007 4  O2 CONCENTRATOR        162.50   90.00    0.00   252.50
 8. PATIENT,EIGHT 0008 4  O2 CONCENTRATOR        182.50  330.00    0.00   512.50
 9. PATIENT,NINE  0009 4  O2 CONCENTRATOR        162.50   90.00    0.00   252.50
10. PATIENT,TEN   0010 4  O2 CONCENTRATOR        182.50  228.00    0.00   410.50
          Enter ?? for more actions
    Select ACTION:Next Screen// ADPL    ADPL
```

```
     Do you wish to turn auto-display 'ON' for this menu? NO// YES

┌─────────────────────────────────────────────────────────────────────────┐
│Billing Transactions         Mar 04, 1999 14:19:56      Page:   1 of   29 │
│Billing Transactions for PROSVENDOR,ONE                                    │
│for FEB 1999                                                               │
│     NAME        SSN  EL PRIMARY ITEM          910    OTHER   SUSP   TOTAL │
│ 1. PATIENT,ONE   0001 4  O2 TANK H SYSTEM    40.00    0.00   0.00   40.00 │
│ 2. PATIENT,TWO   0002 1  O2 CONCENTRATOR    325.00  300.00   0.00  625.00 │
│ 3. PATIENT,THREE 0003 4  O2 NEBULIZER/BUNN SYS 150.00 0.00   0.00  150.00 │
│ 4. PATIENT,FOUR  0004 4  O2 CONCENTRATOR    182.50    0.00   0.00  182.50 │
│ 5. PATIENT,FIVE  0005 4  O2 CONCENTRATOR    162.50   45.00   0.00  207.50 │
│ 6. PATIENT,SIX   0006 4  O2 CONCENTRATOR    162.50   90.00   0.00  252.50 │
│ 7. PATIENT,SEVEN 0007 4  O2 CONCENTRATOR    162.50   90.00   0.00  252.50 │
│ 8. PATIENT,EIGHT 0008 4  O2 CONCENTRATOR    182.50  330.00   0.00  512.50 │
│ 9. PATIENT,NINE  0009 4  O2 CONCENTRATOR    162.50   90.00   0.00  252.50 │
│10. PATIENT,TEN   0010 4  O2 CONCENTRATOR    182.50  228.00   0.00  410.50 │
├─────────────────────────────────────────────────────────────────────────┤
│         Enter ?? for more actions                                         │
└─────────────────────────────────────────────────────────────────────────┘
    ET    Edit Patient        AP   Add Billing Patient  UB   Unaccept Billing
    EB    Edit Billing        CV   Change View          XB   Post Billing
    AB    Accept Billing      QE   Quick Edit
    23    Display 2319        SO   Sign Off Purchase Card
    Select ACTION:Quit//
```

Quit: Enter QU to return to exit the option.

2. Setting Up the Site Parameters

Before setting up the site parameters, you need to make decisions concerning correspondence and sequence numbering of prescriptions. You also need to gather information on Fund Control Points and vendors.

Information Needed for the Site Parameters

Correspondence

Your medical center policy may require that letters be sent under certain circumstances to patients receiving home oxygen and/or to the contractor: e.g., when a patient is added to the program, when a prescription is about to expire, and/or when the service is discontinued. If you want to automate this process, the Home Oxygen Module provides the means. Add the letters to the Prosthetic software using the option Add/Edit Correspondence Skeleton Letter found under the Correspondence menu of the Prosthetic Official's Menu. This should be done prior to editing the site parameters in the option Site Parameters Enter/Edit under the Home Oxygen Main Menu. Here's an example of how use the Add/Edit Correspondence Skeleton Letter option:

```
Select Correspondence Option:  Add/Edit Correspondence Skeleton Letter
Select PROS LETTER NAME: PRESCRIPTION EXPIRATION
  Are you adding 'PRESCRIPTION EXPIRATION' as a new PROS LETTER (the 7TH)? No//
Y (Yes)
NAME: PRESCRIPTION EXPIRATION// <RET>
LETTER TEXT:
  No existing text
  Edit? NO// YES

==[ WRAP ]==[ INSERT ]===========< LETTER TEXT >=========[ <PF1>H=Help ]====
Enter the content of the body of your letter here.



<=====T=======T=======T=======T=======T=======T=======T=======T=======T=>=====T

Is this a Denial type of letter? No// <RET>  (No)
```

Once you have created your letters, determine the following about each letter for the Home Oxygen Site Parameters:

1. Give the letter one of the following letter codes:
   - A   LETTER 1
   - B   LETTER 2
   - C   LETTER 3
2. Determine the number of days prior to the expiration (Days to Expiry) of the prescription that the letter should be created. Examples: A letter to remind a patient to renew a prescription might be sent 30 days prior to the expiration of the prescription. In the case of a welcome letter, enter 0 days to create the letter on the day the prescription is entered.

3. Should the letter be auto-generated or would you rather manage the creation of letters? Auto-generating means that whenever you run the Generate Letters option, a list of patients is created who meet the criteria for the number of days prior the prescription expiration. Letters can be automatically generated from that list.
4. Do you want a header printed on the letter? If you use pre-printed paper that has a letterhead, then you would answer No to this question. If you want a header to print along with the letter content, then you would answer Yes to this question.

Worksheet for defining letter management

Long Name	Letter Code	Days to Expiry	Auto-Gen Y/N	Print Header Y/N

Home Oxygen Vendors

Create a list of the vendors your site uses for providing home oxygen equipment.

Fund Control Points

Create a list of the Fund Control Points (FCP) used for Home Oxygen. There should be **at least one** FCP for 910. Many sites will also have a local number for the liquid gas.

To obtain the FCPs, you can use the Prosthetics package option, Create a No-Form Daily Record, under the Enter New Request menu in Purchasing. At the "Select CONTROL POINT" prompt, enter two question marks to obtain a list of the FCPs used by the Prosthetics and Sensory Aids Service at your site.

Sequence Numbering of Prescriptions

Those sites with local policy that defines the length of time the first, second, third, etc. prescriptions are good, may want to take advantage of a default prescription expiry date. Sequence numbering starts with 1 and increases by one for each new prescription. If the first prescription (sequence number 1) at your site cannot exceed 3 months, then its Default Days to Expiration would be 90 (days). If the second and all further prescriptions cannot exceed 6 months, then sequence number 2 and all the following sequence numbers would be given 180 for Default Days to Expiration. If you choose to use this functionality, adding 5-6 sequence numbers should be sufficient. If you choose not to use default dates, the prescription's "Expiration Date" field can be entered by hand.

Site Parameters Enter/Edit Option

Once you have all the above defined for each site, use the Site Parameters Enter/Edit option and enter the information. The following shows the order of the prompts and a brief description of what you should enter:

Site: Select the site for the parameters you are defining.

Prescription Sequence Number: Start with 1 and increment by 1 for each sequence number you enter. The first prescription when a patient is activated is sequence number 1, the second sequence number 2, etc. You are not required to use this functionality and may bypass the prompt by pressing the <ret> key.

Default Days to Expiration: If you enter a Sequence number, then you will be asked to enter the Default Days to Expiration. The program will look at the date entered for a prescription, check the sequence number of the prescription, add the Default Days to Expiration to the prescription date, and come up with a default response to the Expiration Date prompt for the prescription. This default response may be accepted or changed.

Fund Control Point: Enter each Fund Control Point used by your home oxygen program. These Fund Control Points will be displayed on reports that show statistics by Fund Control Point.

PSAS?: Is this Fund Control Point a Prosthetics Sensory and Aids Service FCP?
Enter Yes if the FCP is 910.
Enter No for all local FCPs.

Home Oxygen Vendors: Enter each vendor that provides home oxygen services for your patients.

Home Oxygen Letter: Enter the name of each letter you created using the Add/Edit Correspondence Skeleton Letter option.

Letter Code: Select one of the following codes:
A   LETTER 1
B   LETTER 2
C   LETTER 3

Days to Prescription Expiry: Enter the number of days prior to the expiration of the prescription that you want to print the letter to send to the patient. Examples: A letter to remind a patient to renew a prescription might be sent **30** days prior to the expiration of the prescription. In the case of a welcome letter, enter **0** days to create the letter on the day the first prescription is entered.

Autogenerate Letter: If you want to be able to obtain a list of patients who meet the criteria for receiving this letter you just defined, enter YES at this prompt.

Print Letter Header: For those sites that print letters on paper already containing a letterhead, enter No at this prompt. For those sites that want to use the on-line letterhead, enter Yes at this prompt.

3. Entering Patient and Prescription Information

In order to bill patients, the program must have information concerning the patient, the patient's prescriptions, and the items being billed to the patient. It needs to know when a patient starts on the program and when the patient is no longer active.

This chapter shows you how to do the following:

- **Add patients to the program** (Add/Edit Home Oxygen Patient option)
- **Enter or change prescription information** (Add/Edit Home Oxygen Patient option)
- **Create or change the billing equipment list for a patient** (Add/Edit Home Oxygen Patient option)
- **Inactivate patients from the program** (Inactivate/Activate Oxygen Patient option)
- **Generate letters** (Generate Letters option)

Add/Edit Home Oxygen Patient

Use this option to:
> **Add a new patient**
> **Edit the patient's eligibility**
> **Activate the patient**
> **Add a new prescription**
> **Add or edit a billing item**

There are three basic sets of data covered in this option.

> The first set is demographic in nature and includes the prosthetics site, the date the patient was activated/reactivated to the Home Oxygen program, and the patient's eligibility.

> A second set of data is for each prescription and includes the first and subsequent prescription dates, a description what was ordered for the patient, and the prescription expiration date.

> The third set of data is called a "billing equipment list". The billing equipment list is used to record the items that are provided on a monthly basis to the patient. Information that will allow costs to flow through to the correct obligation such as the fund control point (FCP) number will be included as well.

The following shows the order of the prompts and a brief description of what you should enter:

> **Site**: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

> **Prosthetics Patient Name**: Enter the patient name in the usual manner: LAST,FIRST or first initial last name plus last 4 digits of the SSN, etc.
> Note: This prompt also accepts an item name. If you enter a single letter or the item name, the program searches through a list of items that have been given to patients.

Add a New Patient

> The Home Oxygen Module will first search the Prosthetics Patient file for the patient. If the patient isn't there, it will search the VISTA Patient file and ask if you want to add the patient as a new Prosthetics Patient. Enter Yes to add the patient as a new Prosthetics Patient.

> **Prosthetics Patient Station**: If this patient is a new Prosthetics Patient, you must also enter a site for the patient.

Edit the Patient's Eligibility

   Home Oxygen Eligibility: Enter the patient's eligibility for home oxygen services.

   Note: When selecting NSC/OP you may see additional prompts.

   1   SC/OP
   2   SC/IP
   3   NSC/IP
   4   NSC/OP

   Home Oxygen Contract Location: Enter the site that will be administering the contract for the home oxygen.

Activate the Patient

   Home Oxygen Activation Date: Enter the latest date the patient was activated as a home oxygen patient. This may be the first date on the program or the most recent activation date following an extended time off the program. An exact date is not required. You may enter a month, day and year or just a month and year. (E.g., 2/2/99, 2/99) Each Activation Date begins a sequence of prescriptions. If you are using this functionality, the earliest prescription date is sequence number 1.

Add a New Prescription

   Home Oxygen Prescription Date: Enter the prescription date here.

   Note: It is strongly suggested that you do not delete prescription dates.

   If this is a new prescription, you will be asked if you are adding a new one. Answer Yes.

   Expiration Date: Enter the expiration date of the prescription. If in the site parameters for the Home Oxygen Module, prescription sequence numbers and default days to expiration were defined, then you may see a default answer here. You may accept the default date or edit it.

   Description: Enter a description of how often to use, flow rate, how administered, etc. according to the prescription.

   Example: `2 LPM O2 by N/C 24hr/d w/conc 6E, 2D, H`

   Note: If no equipment has been entered for this patient, you will receive a message stating:

   `No items found, please enter PRIMARY ITEM`

   Otherwise, a list of the patient's oxygen equipment appears next with the primary equipment item starred (*). You have a choice of adding a new item, deleting an item or editing an item.

   `The following items are already in this patient's template:`

```
            *  1  PROSVENDOR, FOUR                    PROSVENDOR, THREE
               2  OXYGEN                              PROSVENDOR, THREE

            * = Primary Item

            Select ACTION:  (A/D/E):
```

Add or Edit a Billing Item

Pros Item Master Name: Select an item from the Prosthetics Master Item list. If this is the first item added, it should be the Primary item (primary component or system) that the patient will be receiving. The primary item is sometimes used on reports in lieu of listing all items.

> **Primary Item**: For each additional item entered, you will be asked if it is the primary item. If you have already entered a primary item, then answer NO at this prompt.

HCPCS Code: Enter the HCPCS code for the item selected.

Vendor: Enter the vendor that will be supplying the equipment and services.

Quantity: Enter the number authorized to be issued to the patient during the month. Example: For liquid oxygen, enter the number of pounds of liquid.

Unit Cost: Enter the cost for each unit issued. Type a dollar amount with 2 decimal digits.

Note: The program will use the Quantity and Unit Cost to calculate the total amount for billing.

Unit of Issue: Select a unit of issue.

ICD9 Code: Enter the diagnosis that is most closely related to the reason this patient is receiving oxygen.

Remarks: Enter any further information about this patient, up to 30 characters. This information is displayed on the patient's 2319 record on screen 8.
> Example: `Equip used in conj with CPAP`

Item Type: Is this an initial issue (I), replacement (R), or repair (X)? If this is a 910 issue, enter X. If this is out of a local FCP, enter either I or R.

Fund Control Point: Through which FCP will this purchase be handled? Enter the FCP here.

At this point you may edit the data you entered, add a new item for this prescription, or delete an item.

Example:

```
SITE: HINES ISC VAMC// <ret>                                   499

Select PROSTHETICS PATIENT NAME: PATIENT1,SEVEN          01-05-32    000458476
NO      EMPLOYEE
          ...OK? Yes// <ret>  (Yes)
        SUPPORT ISC

HOME OXYGEN ELIGIBILITY: 4  NSC/OP
HOME OXYGEN CONTRACT LOCATION: HINES ISC VAMC// <ret>
HOME OXYGEN ACTIVATION DATE: JUL 1,1999// <ret>  (JUL 01, 1999)
Select HOME OXYGEN PRESCRIPTION DATE: t   JUL 01, 1999
  Are you adding 'JUL 01, 1999' as a new HOME OXYGEN PRESCRIPTION (the 1ST for this
PROSTHETICS PATIENT)? No// y (Yes)
DATE: JUL 1,1999// <ret>          (Note: Prescription dates should not be deleted.)
EXPIRATION DATE: SEP 29,1999// <ret>  (SEP 29, 1999) (Note: The default date was
defined in the Site Parameters as 90 days for the prescription sequence #1.)
DESCRIPTION:
  No existing text
  Edit? NO// y  YES

==[ WRAP ]==[ INSERT ]==============< DESCRIPTION >===========[ <PF1>H=Help ]====
2 LPM O2 by N/C 24hr/d w/conc 6E, 2D, H.


<======T=======T=======T=======T=======T=======T=======T=======T=======T=>=====T

No items found, please enter PRIMARY ITEM

Select PROS ITEM MASTER NAME: PROSVENDOR, FOUR12381        PROSVENDOR, FOUR

          ...OK? Yes// <ret>  (Yes)
ITEM: TANKS E PORTABLES// <ret>
HCPCS CODE: TANKS  VA111      CONSERVER, OXYGEN
VENDOR: PROSVENDOR, THREE                    PH:555-555-5555  NO: 70000
ORD ADD:  10 FAIRWAY DRIVE                    FMS:
        CHICAGO, IL 60000                    CODE:          FAX:


          ...OK? Yes// <ret>  (Yes)
QUANTITY: 6
UNIT COST: 40
UNIT OF ISSUE: EACH  EA          EACH
ICD9 CODE: 416.8          CHR PULMON HEART DIS NEC
          ...OK? Yes// <ret>  (Yes)
REMARKS: <ret>
ITEM TYPE: X  Repair
Select FUND CONTROL POINT: 910 PROSTHETIC SERVICES

The following items are already in this patient's template:

 *   1  PROSVENDOR, FOUR                     PROSVENDOR, THREE

 * = Primary Item

Select ACTION:  (A/D/E): Add
```

Inactivate/Activate Oxygen Patient

Use this option to:
> **Inactivate a Home Oxygen Patient**
> **Activate a Home Oxygen Patient**

Inactivate patients for any of the following reasons:
> Discontinued by Patient
> Rx Expired
> MD Discontinued
> Patient Deceased
> Inpatient Status
> Entered in Error
>
> Note on Inpatient Status: For those patients who are often admitted as an inpatient to manage their condition but whose stay is generally not lengthy, they do not need to be inactivated. Use the Inpatient Status only when it is apparent that their stay will be lengthy and that they may not return to the Home Oxygen Program.

When an Inactivation Date and Inactivation Reason are recorded for a patient, the patient is inactivated causing the last prescription in the patient's file to be canceled.

When a patient is reactivated, the Inactivation date is deleted. When the inactivation date is deleted, the reason for inactivation is automatically deleted by the system. The prescription will remain unchanged unless it is directly edited in the Add/Edit Home Oxygen Patient option.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

Prosthetics Patient Name: Enter the patient name in the usual manner: LAST,FIRST or first initial last name plus last 4 digits of the SSN, etc. Note: If you enter a single letter, the program searches through a list of items given to patients.

Home Oxygen Inactivation (or Activation) Date: Enter the date the patient is either inactivated or activated.

Home Oxygen Inactivat. Reason: If the patient is being inactivated, this prompt will appear. Select the reason the patient is being inactivated.
> D   Discontinued by Patient
> R   Rx Expired
> M   MD Discontinued
> P   Patient Deceased
> I   Inpatient Status
> E   Entered in Error

Example:

```
SITE: HINES ISC VAMC// <ret>                               499
Select PROSTHETICS PATIENT NAME:    PATIENT1,SEVEN      SUPPORT ISC      01-05-32
   000000017    NO     EMPLOYEE
Are you sure you want to inactivate PROSPATIENT1,ONE ?? NO// y  YES
HOME OXYGEN INACTIVATION DATE: TODAY// <ret>  (JUL 01, 1999)
HOME OXYGEN INACTIVAT. REASON: ??
     Enter a code (P, R, M, D, I, or E) for the reason for discontinuance of home
     oxygen therapy.
     Choose from:
       D        DISCONTINUED BY PATIENT
       R        Rx EXPIRED
       M        MD DISCONTINUED
       P        PATIENT DECEASED
       I        INPATIENT STATUS
       E        ENTERED IN ERROR
HOME OXYGEN INACTIVAT. REASON: p  PATIENT DECEASED
Select PROSTHETICS PATIENT NAME: <ret>
```

Generate Letters

If you set up your site parameters to auto-generate your letters, this option will build of list of patients who meet the criteria for receiving each type of letter (e.g., recently activated, within so many days of the expiration of their prescription, about to be discontinued from the home oxygen program).

Note: Once you print a letter for a patient, the patient will no longer appear on the list for that type of letter. So if you print a welcome letter for a patient, that patient will no longer appear as needing a welcome letter. Use the option Print/Display Patient Correspondence Letter under the Correspondence menu within the Prosthetic Official's Menu if you need to reprint the letter.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

If your current list is not so current, then generate a new list as shown here. This will place any patients on the list that have met the criteria since the last list was generated:

```
Do you wish to manage the current list? No// <ret>  (No)
Do you wish to generate a new list which will discard any edits? No// Y  (Yes)
```

```
RMPO LETTER TYPE              Mar 09, 1999 08:57:06        Page:    1 of    1
                                  HINES ISC VAMC
                       HOME OXYGEN PATIENT LETTER TYPE LIST
    Description                              Number of Patients on List
1   LETTER 1                                 3
2   LETTER 2                                 5
3   LETTER 3                                 1



          Enter ?? for more actions
ML   Manage Letter List    LT   Print Letters
Select Action: Quit// LT   Print Letters
Select letter type line #:  (1-3): 1
```

> **ML Manage Letter List**: This functionality generates a new list, adding any patients that meet the criteria.
> ```
> Select Action: Quit// ml   Generate Letter List
> Select letter type line #:  (1-3): 2
> Generating a new list...  .
> DONE GENERATING A NEW LIST...
> ```

LT Print Letters: This functionality lets you add patients, print the letters for all or selected patients, and delete entries.

```
Select Action: Quit// LT   Print Letters
Select letter type line #:  (1-3): 1
Processing....
```

```
┌──────────────────────────────────────────────────────────────────────────────┐
│RMPO LETTER                      Mar 09, 1999 08:57:24       Page:    1 of    1  │
│                           WELCOME TO HOME OXYGEN                                 │
│                        HOME OXYGEN PATIENT LETTER LIST                           │
│   Patient            SSN          Primary Item        Activation Date Rx Expiry │
│1  PATIENT1,EIGHT  000-00-0008 O2 CONCENTRATOR        MAR 06, 1999    JUN 04, 1999│
│2  PATIENT1,NINE   000-00-0009 O2 CONCENTRATOR        MAR 08, 1999    JUN 06, 1999│
│3  PATIENT1,TEN    000-00-0110 O2 CONCENTRATOR        MAR 08, 1999    JUN 06, 1999│
│                                                                                 │
│                                                                                 │
│                                                                                 │
│                                                                                 │
├──────────────────────────────────────────────────────────────────────────────┤
│          Enter ?? for more actions                                              │
└──────────────────────────────────────────────────────────────────────────────┘
AP   Add Patient to the list           PP   Print a letter for one patient
DE   Delete List Entry                  X   Exit to Letter
AL   Print all letters
```

    AP Add Patient to the list: Use this action if you want to add a patient to the list to receive a letter.

```
Select Action: Quit// ap   Add Patient to the list

Select PROSTHETICS PATIENT NAME: NAME,PATIENT
```

    DE Delete List Entry: This allows you to delete selected entries.

```
Select Action: Quit// DE   Delete List Entry
Enter lines to delete:  (1-2): 1
```

    AL Print All Letters: This sends all the letters in the list to a selected Device.

```
Select Action: Quit// AL   Print all letters
DEVICE: HOME//
```

    PP Print a letter for one patient: You may send a letter for one or more selected patients to a selected Device. Enter your selections singly or in a range (e.g., 3,6,7,8 or 3,6-8, etc.)

```
Select Action: Quit// PP   Print a letter for one patient
Enter a list or range of numbers (1-2): 1
DEVICE: HOME//
```

Device: Enter a printer name. This will **not** allow you to print to the screen or to a slave printer.

In the following example letter, the header VAMC address information is taken from the Prosthetics Site Parameters file.

```
                         Department of Veterans Affairs
                                HINES ISC VAMC
                                 BUILDING #37
                              HINES, IL   60141
MAR 11,1999
PROSPATIENT2,ONE                              In Reply Refer To: HINES ISC VAMC/121
                                          SSN: 000-00-0021
BELLWOOD, ILLINOIS   60611                          ⎧ Pt. IEN ⎫          ⎧ Rx Sequence number ⎫

                                          4946
                                          Current Home Oxygen Rx#: 1
                                          Rx Expiration Date: JUN 6,1999
Dear Mr. PROSPATIENT2,ONE
Welcome to the Home Oxygen Program

This is the welcome letter containing routine information for any patient
entering the program.  The contents of this letter are specific to your
site.  It is created prior to editing the letter information in the site
parameters (Site Parameters Enter/Edit) for Home Oxygen.



Prosthetics Service
```

To help you move around through your letter list on any of the Generate Letters screens, there are a number of options available to you. Enter two question marks at the "Select Action" prompt to see them. This functionality is discussed in the Introduction under List Manager Functions.

4. Billing

There are a number of activities associated with billing. This chapter explains how to do the following:

- **Find discrepancies that will affect accurate billing** (Pre-Billing Discrepancy Report option)
- **Correct the discrepancies that affect accurate billing** (See Pre-Billing Discrepancy Report)
- **Create a billing list** (Billing Transactions option)
- **Add patients to the billing list** (Billing Transactions option)
- **Edit patient data after the billing list is created** (Billing Transactions option)
- **Suspend dollar amounts for an item** (Billing Transactions option)
- **Complete/accept the billing** (Billing Transactions option)
- **Sign off the purchase card** (Billing Transactions or Purchase Card Sign Off options)
- **Verify that everything went okay with the posted billing** (Verify Posted Billing Transactions option)

Pre-Billing Discrepancy Report

Always run this report and correct any discrepancies found prior to using the option Billing Transactions. If discrepancies remain unfixed, the patient will not be added to the billing list which can only be created once a month for each vendor.

Find Discrepancies that Affect Accurate Billing

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Billing Month: Enter the month and year you want shown in the report. Examples: February 1999, Feb 99, 2/99, 0299, 2-99.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
HOME OXYGEN PRE-BILLING REPORT                   MAR  3,1999  10:20     PAGE 1
Name                          SSN      Reason
------------------------------------------------------------------------------

PROSPATIENT2,TWO                0022     No RX on file
```

Correct Discrepancies that Affect Accurate Billing

The following describes the discrepancy and tells you how to correct it.

Different Home Oxygen Contract Location: The Site you enter at the first prompt in this option, is not the same as the Contract Location for the patient shown in the report. If the contract location should be the same, change the location using the Add/Edit Home Oxygen Patient option.

No Home Oxygen Information: There is no eligibility entered for the patient. Enter the patient's eligibility and any other missing home oxygen information using the Add/Edit Home Oxygen Patient option.

Deactivated: The patient was inactivated prior to the billing period. If the patient needs to be reactivated, use the Inactivate/Activate Oxygen Patient option.

No RX on file: The patient has no prescription on file. Enter prescription information using the Add/Edit Home Oxygen Patient option. If the patient is not participating in the program, you may want to inactivate the patient using the Inactivate/Activate Oxygen Patient option.

RX expires prior to billing period: The prescription expired before the selected billing period. If the patient has a new prescription for the period, use the Add/Edit Home Oxygen Patient option to enter the prescription. If not, you may want to inactivate the patient using the Inactivate/Activate Oxygen Patient option.

No items on file: The patient's record shows no items to be billed. Use the Add/Edit Home Oxygen Patient option to add items for the patient.

No items for vendor: There is a vendor attached to the patient record but no item. Use the Add/Edit Home Oxygen Patient option to edit the item for the patient.

Billing Transactions

Note: Run the Pre-Billing Discrepancy Report under the Reports menu to find any records that lack complete or up-to-date information. Correct those discrepancies prior to using this Billing Transactions option. Any incomplete records will not appear on the billing list. The billing list can only be generated once a month for each vendor.

The main purpose of the Home Oxygen Module is to help you manage the billing. This option produces a list of patients that received oxygen therapy over a selected month from a specified vendor. You can use this option to do a number of things, including edit the patient or billing record, accept or unaccept the billing, display the 2319, post the billing, and sign off using a purchase card or 1358.

Create the Billing List

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

Billing Month: Enter the month you want the bill to cover, e.g., 2-1999, 2-99, Feb 99 for February 1999.

Vendor: Select the vendor for which you want the list generated.

A screen similar to the following will appear:

```
Billing Transactions          Mar 04, 1999 14:19:56          Page:    1 of   29
Billing Transactions for PROSVENDOR, THREE
for FEB 1999
      NAME          SSN  EL PRIMARY ITEM            910    OTHER    SUSP    TOTAL
 1. PATIENT,ONE     0001 4  O2 TANK H SYSTEM       40.00    0.00    0.00    40.00
 2. PATIENT,TWO     0002 1  O2 CONCENTRATOR       325.00  300.00    0.00   625.00
 3. PATIENT,THREE   0003 4  O2 NEBULIZER/BUNN SYS 150.00    0.00    0.00   150.00
 4. PATIENT,FOUR    0004 4  O2 CONCENTRATOR       182.50    0.00    0.00   182.50
 5. PATIENT,FIVE    0005 4  O2 CONCENTRATOR       162.50   45.00    0.00   207.50
 6. PATIENT,SIX     0006 4  O2 CONCENTRATOR       162.50   90.00    0.00   252.50
 7. PATIENT,SEVEN   0007 4  O2 CONCENTRATOR       162.50   90.00    0.00   252.50
 8. PATIENT,EIGHT   0008 4  O2 CONCENTRATOR       182.50  330.00    0.00   512.50
 9. PATIENT,NINE    0009 4  O2 CONCENTRATOR       162.50   90.00    0.00   252.50
10. PATIENT,TEN     0010 4  O2 CONCENTRATOR       182.50  228.00    0.00   410.50
          Enter ?? for more actions
Select ACTION:Next Screen// ??
```

Note: Entering ?? displays the other options available including the List Manager options for moving about and printing the screens. For information about the List Manager options (+, -, UP, DN, etc.), see List Manager Functions in the Introduction.

Billing Actions

There are a number of actions that you can take while in billing. The following information describes each of the actions.

```
ET   Edit Patient          AP   Add Billing Patient   DP   Delete Patient Billing
EB   Edit Billing          CV   Change View           UB   Unaccept Billing
AB   Accept Billing        QE   Quick Edit            XB   Post Billing
23   Display 2319          SO   Sign Off Purchase Card
```

Correct Data on a Patient Record

ET Edit Patient: If you create the billing list and then discover that some items are not covered in the bill for a patient, you can use this function to edit the information in the patient's record. This option only lets you correct information for patients already on the billing list.

Note: If the patient does not appear on the billing list, run the Pre-Billing Discrepancy report to find out what is missing and correct the record. Then use the Add Billing Patient action described below to add the patient to the list.

Example: In the following list, the user notices that the amount for an item is not showing due to the vendor not being defined for that item. This was determined by using the Pre-Billing Discrepancy report. We can use Edit Patient to add the vendor and correct any other information that is not complete.

```
Billing Transactions          Jul 04, 1999 14:19:56        Page:    1 of   29
Billing Transactions for PROSVENDOR, THREE
for JUN 1999
     NAME            SSN   EL PRIMARY ITEM             910     OTHER   SUSP    TOTAL
 1. PATIENT,ONE      0001 4  O2 TANK H SYSTEM         40.00    0.00    0.00    40.00
 2. PATIENT,TWO      0002 1  O2 CONCENTRATOR         325.00  300.00    0.00   625.00
 3. PATIENT,THREE    0003 4  O2 NEBULIZER/BUNN SYS   150.00    0.00    0.00   150.00
 4. PATIENT,FOUR     0004 4  O2 CONCENTRATOR         182.50    0.00    0.00   182.50
 5. PATIENT,FIVE     0005 4  O2 CONCENTRATOR         162.50   45.00    0.00   207.50
 6. PATIENT,SIX      0006 4  O2 CONCENTRATOR         162.50   90.00    0.00   252.50
 7. PATIENT,SEVEN    0007 4  O2 CONCENTRATOR         162.50   90.00    0.00   252.50
 8. PATIENT,EIGHT    0008 4  O2 CONCENTRATOR         182.50  330.00    0.00   512.50
 9. PATIENT,NINE     0009 4  O2 CONCENTRATOR         162.50   90.00    0.00   252.50
10. PATIENT,TEN      0010 4  O2 CONCENTRATOR         182.50  228.00    0.00   410.50
           Enter ?? for more actions
Select ACTION:Next Screen// E
          1    Edit Billing
          2    Edit Patient
       CHOOSE 1-2: 2   Edit Patient
       Enter a list or range of numbers (1-6): 4
       EDITING PROSPATIENT2,THREE...

       HOME OXYGEN ELIGIBILITY: NSC/OP// <ret>
       HOME OXYGEN CONTRACT LOCATION: HINES ISC VAMC// <ret>
       HOME OXYGEN ACTIVATION DATE: JAN 29,1999// <ret>
       Select HOME OXYGEN PRESCRIPTION DATE: 5-1-1999//  <ret>
       DATE: MAY 1,1999// <ret>
       EXPIRATION DATE: OCT 28,1999// <ret>
       DESCRIPTION:
         No existing text
         Edit? NO// <ret>

       The following items are already in this patient's template:

       *   1  O2 CONCENTRATOR                       PROSVENDOR, THREE
```

```
           2  OXYGEN CONTENTS LIQ PER/UNIT         << VENDOR NOT DEFINED >>

     * = Primary Item

     Select ACTION:  (A/D/E): e  Edit
     Select an ITEM:  (1-2): 2     OXYGEN CONTENTS LIQ PER/UNIT
     PRIMARY ITEM: NO// <ret>
     ITEM: OXYGEN CONTENTS LIQ PER/UNIT // <ret>
     HCPCS CODE:      E0442     OXYGEN CONTENTS LIQ PER/UNIT
     VENDOR: PROSVENDOR, THREE                       PH:555-555-5555  NO: 71608
     ORD ADD:200 VENDOR DRIVE              FMS:
             VENDOR, IL 60048              CODE:        FAX:


              ...OK? Yes// <ret>  (Yes)
     QUANTITY: (nn)
     UNIT COST: ($$)
     UNIT OF ISSUE: LB  POUND
     ICD9 CODE:      416.8        CHR PULMON HEART DIS NEC
     REMARKS: <ret>
     ITEM TYPE: X  Repair
     Select FUND CONTROL POINT: 913 PROSTHETIC SUPPLIES

     The following items are already in this patient's template:

         1  CONCENTRATOR                   PROSVENDOR, THREE
     *   2  OXYGEN CONTENTS, GASEOUS, PE   PROSVENDOR, THREE

     * = Primary Item

     Select ACTION:  (A/D/E): <ret>
```

```
Billing Transactions          Jul 04, 1999 14:19:56       Page:   1 of   29
Billing Transactions for PROSVENDOR, THREE
for JUN 1999
     NAME            SSN   EL PRIMARY ITEM          910    OTHER    SUSP    TOTAL
 1. PATIENT,ONE     0001  4  O2 TANK H SYSTEM     40.00    0.00    0.00    40.00
 2. PATIENT,TWO     0002  1  O2 CONCENTRATOR     325.00  300.00    0.00   625.00
 3. PATIENT,THREE   0003  4  O2 NEBULIZER/BUNN SYS 150.00   0.00   0.00   150.00
 4. PATIENT,FOUR    0004  4  O2 CONCENTRATOR     182.50  360.00    0.00   542.50
 5. PATIENT,FIVE    0005  4  O2 CONCENTRATOR     162.50   45.00    0.00   207.50
 6. PATIENT,SIX     0006  4  O2 CONCENTRATOR     162.50   90.00    0.00   252.50
 7. PATIENT,SEVEN   0007  4  O2 CONCENTRATOR     162.50   90.00    0.00   252.50
 8. PATIENT,EIGHT   0008  4  O2 CONCENTRATOR     182.50  330.00    0.00   512.50
 9. PATIENT,NINE    0009  4  O2 CONCENTRATOR     162.50   90.00    0.00   252.50
10. PATIENT,TEN     0010  4  O2 CONCENTRATOR     182.50  228.00    0.00   410.50
      Enter ?? for more actions
     Select ACTION:Next Screen//
```
The action corrected the billing list as shown in bold above.

Correct Billing Data and/or Suspend Dollar Amts

EB Edit Billing: You can edit the billing information for a patient using this action. It allows you to add, delete, edit, or zero out an item. This option can also be used to suspend dollar amounts for an item. The patient must be on the billing list.

Example:

```
Billing Transactions          Jul 04, 1999 14:19:56       Page:   1 of   29
Billing Transactions for PROSVENDOR, THREE
for JUN 1999
     NAME          SSN  EL PRIMARY ITEM           910    OTHER    SUSP    TOTAL
 1. PATIENT,ONE    0001 4  O2 TANK H SYSTEM       40.00    0.00    0.00    40.00
 2. PATIENT,TWO    0002 1  O2 CONCENTRATOR       325.00  300.00    0.00   625.00
 3. PATIENT,THREE  0003 4  O2 NEBULIZER/BUNN SYS 150.00    0.00    0.00   150.00
 4. PATIENT,FOUR   0004 4  O2 CONCENTRATOR       182.50  360.00    0.00   542.50
 5. PATIENT,FIVE   0005 4  O2 CONCENTRATOR       162.50   45.00    0.00   207.50
 6. PATIENT,SIX    0006 4  O2 CONCENTRATOR       162.50   90.00    0.00   252.50
 7. PATIENT,SEVEN  0007 4  O2 CONCENTRATOR       162.50   90.00    0.00   252.50
 8. PATIENT,EIGHT  0008 4  O2 CONCENTRATOR       182.50  330.00    0.00   512.50
 9. PATIENT,NINE   0009 4  O2 CONCENTRATOR       162.50   90.00    0.00   252.50
10. PATIENT,TEN    0010 4  O2 CONCENTRATOR       182.50  228.00    0.00   410.50
        Enter ?? for more actions
```
```
        Select ACTION:Next Screen// eb   Edit Billing
        Enter a list or range of numbers (1-6): 1
        PROSPATIENT2,FOUR   000-00-0024
        Current Prescription (#1)
             Active Date: FEB 28,1999    Expiration Date: JUL 1,1999
             2 liters per minute by nasal cannula, as needed with an "H" tank.


             HCPCS  Description                 FCP   Qty   Cost   Susp.   Total
         1.  Ennnn  TANKS H                     910    1   40.00   0.00    40.00

        TOTAL COST                                                        40.00

        Total 910 Charges:                                                40.00

        Total Station FCP Charges:                                         0.00

        Select ACTION:  (A/D/E/Z): ??

        Enter a code from the list.
             Select one of the following:

                  A        Add
                  D        Delete
                  E        Edit
```
```
                  Z        Zero
```
(This will zero out the cost of the item without going through edit.)

Zero Out an Item

```
        Select ACTION:  (A/D/E/Z): z   Zero
        PROSPATIENT2,FOUR   000-00-0024
        Current Prescription (#1)
             Current Prescription (#1)
             Active Date: FEB 28,1999    Expiration Date: JUL 1,1999
             2 liters per minute by nasal cannula, as needed with an "H" tank.

             HCPCS  Description                 FCP   Qty   Cost   Susp.   Total
         1.  Ennnn  TANKS H                     910    1    0.00   0.00     0.00

        TOTAL COST                                                          0.00
```

```
                    Total 910 Charges:                                  0.00

                    Total Station FCP Charges:                          0.00
```

Edit an Item

```
        Select ACTION:  (A/D/E/Z): e  Edit
        PRIMARY ITEM: YES// <ret>
        QUANTITY: 1// <ret>
        UNIT COST: 0// 60
        REMARKS: <ret>
        SUSPENDED AMOUNT: 0// <ret>
        Select FUND CONTROL POINT: 910 PROSTHETIC SERVICES// <ret>
        ITEM TYPE: x  Repair
        UNIT OF ISSUE: EA// <ret>
        PROSPATIENT2,FOUR    000-00-0024
        Current Prescription (#1)
             Current Prescription (#1)
             Active Date: FEB 28,1999    Expiration Date: JUL 1,1999
             2 liters per minute by nasal cannula, as needed with an "H" tank.

            HCPCS  Description                    FCP    Qty    Cost   Susp.   Total
        1.  Ennnn  TANKS H                        910      1   60.00    0.00   60.00

        TOTAL COST                                                             60.00

        Total 910 Charges:                                                     60.00

        Total Station FCP Charges:                                              0.00
```

Add an Item

```
        Select ACTION:  (A/D/E/Z): a  Add
        Select PROS ITEM MASTER NAME: 3516        OXYGEN
        HCPCS CODE: Ennn        OXYGEN CONTENTS GAS PER/UNIT
        ICD9 CODE:    416.8        CHR PULMON HEART DIS NEC
        PRIMARY ITEM: N  NO
        QUANTITY: 50
        UNIT COST: .50
        REMARKS: <ret>
        SUSPENDED AMOUNT: 25
        SUSPENDED REASON: NOT DELIVERED ON DATE STATED
        Select FUND CONTROL POINT: 910 PROSTHETIC SERVICES
        ITEM TYPE: X  Repair
        UNIT OF ISSUE: LB          POUND
        PROSPATIENT2,FOUR    000-00-0024
        Current Prescription (#1)
             Active Date: FEB 28,1999    Expiration Date: JUL 1,1999
             2 liters per minute by nasal cannula, as needed with an "H" tank.

            HCPCS  Description                    FCP    Qty    Cost   Susp.   Total
        1.  Ennnn  TANKS H                        910      1   60.00    0.00   60.00
        2.  Ennnn  OXYGEN                         910     25    0.50   25.00   25.00

        TOTAL COST                                                             85.00

        Total 910 Charges:                                                     85.00

        Total Station FCP Charges:                                              0.00

        Total Suspended Charges:                                               25.00
```

Delete an Item

```
        Select ACTION:  (A/D/E/Z): Delete
```

```
Select an ITEM:  (1-2): 2
Are you SURE you want to delete this item? NO// YES  ...deleted!
PROSPATIENT2,FOUR     000-00-0024
Current Prescription (#1)
     Current Prescription (#1)
     Active Date: FEB 28,1999    Expiration Date: JUL 1,1999
     2 liters per minute by nasal cannula, as needed with an "H" tank.

     HCPCS  Description                    FCP    Qty    Cost   Susp.   Total
  1. Ennnn  TANKS H                        910      1   60.00    0.00   60.00

TOTAL COST                                                             60.00

Total 910 Charges:                                                     60.00

Total Station FCP Charges:                                              0.00
```

Add a Patient to the Billing List

AP Add Billing Patient: If a patient does not appear on the billing list, use the Pre-Billing Discrepancy Report to find out what is missing or incorrect in the patients record. Correct the discrepancy and then use this function to add the patient to the list.

Example:

```
Select ACTION:Quit// ADD   Add Billing Patient


Select PROSTHETICS PATIENT NAME:      PROSPATIENT2,FIVE       HINES, IL      03-03-6
6    0000000025    NO    NSC VETERAN

Item 19 was added to Billing Transaction....
```

Delete a Patient from the Billing List

DP Delete Patient Billing: This action removes a patient from the selected month's billing list.

Change the Quantity of an Item
QE Quick Edit: Use this action to quickly edit the quantity of an item.

```
Select ACTION:Quit// qe   Quick Edit
Enter a list or range of numbers (1-5): 1
IOWA,HERBERT F    000-19-7641
Current Prescription (#1)
     Active Date: FEB 24,1999   Expiration Date: JUL 1,1999

    HCPCS  Description                FCP   Qty   Cost   Susp.   Total
 1.  E0430  OXYGEN                     910    1  500.00   0.00  500.00
 2.  A4616  OXYGEN HOSE UNION          910   25    0.75   0.00   18.75

TOTAL COST                                                     518.75

Total 910 Charges:                                             518.75

Total Station FCP Charges:                                       0.00

 1.  E0430  OXYGEN                     910    1  500.00   0.00  500.00
QUANTITY: 1// <ret>
 2.  A4616  OXYGEN HOSE UNION          910   25    0.75   0.00   18.75
QUANTITY: 25// <ret>

    HCPCS  Description                FCP   Qty   Cost   Susp.   Total
 1.  E0430  OXYGEN                     910    1  500.00   0.00  500.00
 2.  A4616  OXYGEN HOSE UNION          910   25    0.75   0.00   18.75

TOTAL COST                                                     518.75

Total 910 Charges:                                             518.75

Total Station FCP Charges:                                       0.00

Enter RETURN to continue or '^' to exit:
```

Accept the Billing

AB Accept Billing: Once you are sure the bill is correct, use this action to Accept the billing. You may accept selected records or a range of records. This places a small "a" before those records that have been accepted.

```
Select ACTION:Quit// AB   Accept Billing
Enter a list or range of numbers (1-6): 1
```

View Only Accepted or Unaccepted Records

CV Change View: Use this action when you want to limit your list to just those records that are Accepted or Unaccepted. The default view is Both.

```
Select ACTION:Quit// cv   Change View
     Select one of the following:

         A        Accepted
         U        Unaccepted
         B        Both

Which Transactions would you like displayed?: Both// u  Unaccepted
```

Unaccept the Billing

UB Unaccept Billing: If you accepted a billing record in error, you can unaccept it using this action. It removes the small "a".

```
Select ACTION:Quit// ub   Unaccept Billing
Enter a list or range of numbers (1-6): 1
```

Post the Billing

XB Post Billing: After accepting a billing, you can post it using this action.
Also, anytime you have records that are Accepted, when you exit, you will be asked if
you would like to post the bills.

Note: **If a purchase card is being used, accepting can be done by multiple
people, but posting should only be done by one person. When using a
purchase card payment type, <u>do not</u> Post Billing within List Manager.
Select Quit and you will see the example below for Purchase Card.
A small "p" next to the patient name and a "*" next to an amount
indicates that the record is only partially posted.**

Hint: **If you have not loaded all your home oxygen patients into the program,
you can still post those not in the program using the Create a No-Form
Daily Record option under Purchasing.**

**Warning: The purchase card holder must have a monthly purchase limit greater
than the total purchase order amount.**

Example: (1358 Payment Type)
```
Select ACTION:Quit// ?
ET   Edit Patient          AP   Add Billing Patient  UB   Unaccept Billing
EB   Edit Billing          CV   Change View          XB   Post Billing
AB   Accept Billing        QE   Quick Edit
23   Display 2319          SO   Sign Off Purchase Card
Select ACTION:Quit// xb   Post Billing
Enter a list or range of numbers (1-10): 1-10


Are you Sure you Want to Post Transactions? NO// y  YES


Fund Control Point: 910 PROSTHETIC SERVICES
Select Fund Control Point: 910 PROSTHETIC SERVICES      499-C35010   8509.75
PAYMENT TYPE: ?

Enter 1 for 1358 or P for Purchase Card.
Choose from:
1        1358
P          PURCHASE CARD

PAYMENT TYPE: 1358
Select Obligation Number: C35010  499-C35010    09-08-93  1358   Obligated - 1358
           FCP: 910     $ 10000.00
Are you sure? NO// YES

910 PROSTHETIC SERVICES   ...Posted

Fund Control Point: 913 PROSTHETIC SUPPLIES
Select Fund Control Point: 913 PROSTHETIC SUPPLIES    499-C35009   7900.00
PAYMENT TYPE: 1358
Select Obligation Number: C35010  499-C35010    09-08-93  1358   Obligated - 1358
           FCP: 913     $ 10000.00
Are you sure? NO// YES

913 PROSTHETIC SUPPLIES   ...Posted

All Fund Control Points posted successfully
Press any Key to Continue: <ret>
```

Example: (Purchase Card Type)

```
Select ACTION:Quit// ?
ET   Edit Patient        AP   Add Billing Patient  UB   Unaccept Billing
EB   Edit Billing        CV   Change View          XB   Post Billing
AB   Accept Billing      QE   Quick Edit
23   Display 2319        SO   Sign Off Purchase Card
Select ACTION:Quit// <ret>   QUIT


There are patients whose billing transactions have been accepted
 and not yet posted
Would you like to post them now? NO// YES

Are you Sure you Want to Post Transactions? NO// YES

Fund Control Point: 910 PROSTHETIC SERVICES
Select Fund Control Point: <ret>
PAYMENT TYPE: ?

Enter 1 for 1358 or P for Purchase Card.
Choose from:
1       1358
P        PURCHASE CARD


PAYMENT TYPE: PURCHASE CARD

ENTER A NEW PURCHASE ORDER NUMBER OR A COMMON NUMBERING SERIES
    PURCHASE ORDER:   499-P7         PC AUTHORIZED BUYER
    Are you adding '499-P70151' as a new Purchase Order number ? Y  (YES)
PURCHASE CARD NAME: VISA  VISA-CARD
COST CENTER: 827300//  PROSVENDOR,FIVE
Are you sure? NO// YES

910 PROSTHETIC SERVICES   ...Posted

Fund Control Point: 913 PROSTHETIC SUPPLIES
Select Fund Control Point: <ret>
PAYMENT TYPE: PURCHASE CARD

ENTER A NEW PURCHASE ORDER NUMBER OR A COMMON NUMBERING SERIES
    PURCHASE ORDER:   499-P7         PC AUTHORIZED BUYER
    Are you adding '499-P70152' as a new Purchase Order number ? Y  (YES)
PURCHASE CARD NAME: VISA  VISA-CARD
COST CENTER: 827300//  PROSVENDOR,FIVE
Are you sure? NO// YES

913 PROSTHETIC SUPPLIES   ...Posted

All Fund Control Points posted successfully
Press any Key to Continue: <ret>
```

Sign Off on the Purchase Card

SO Sign Off Purchase Card: Use this action to sign off on purchase card transactions. If you have posted more than one

```
Select ACTION:Quit// SO   Sign Off Purchase Card
PAYMENT TYPE: PURCHASE CARD
Select FUND CONTROL POINT: 910 PROSTHETIC SERVICES     P70148

Verifying all items posted for FCP. Please be patient.
Sure you want to Continue? YES
Enter ELECTRONIC SIGNATURE CODE: (Enter your electronic signature code)
Thank you.
Cost of this request: $$$.00
Current Control Point Balance: $$$$.00
```

View the 2319

23 Display 2319: Use this action to view the 2319. Screen #8 of the 2319 contains the home oxygen information.

```
Select ACTION:Quit// 23    Display 2319
Enter a number (1-5): 2

*Comments on file

Current Disability Codes are:

COS/B           SC VIETNAM     S/C
AMP/LSD         SC VIETNAM     S/C                    Deleted...
AMP/LPH         OTHERS ELIG    NSC  PL-96-151
Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue: 8
HOME OXYGEN ITEMS
PROSPATIENT2,SIX    000-00-0026
Current Prescription (#1)
      Active Date: FEB 28,1999   Expiration Date: JUL 1,1999
      2 liters per minute by nasal cannula, 24 hours a day, with an oxygen
      concentrator, 6 "E" tanks, 2 "D" tanks, and an "H" tank as the emergency
      back up system.
Enter RETURN to continue or '^' to exit: <ret>


PROSPATIENT2,SIX            SSN: 000-00-0026   DOB: JAN 1,1918    CLAIM#
   Date    Qty    Item    Type  Vendor    Sta   Serial   Delivery Date  Tot Cost
1. 05/12/99  1  TANKS E PO      VENDOR    499            05/26/99       50.00
2. 05/12/99  1  TANKS E PO      VENDOR    499            05/26/99       50.00

End of Home Oxygen records for this veteran!
+=Turned-In  *=Historical Data  I=Initial  X=Repair  S=Spare  R=Replacement
Enter 1-2 to show full entry, '^' to exit or `return` to continue.  1

PROSPATIENT2,SIX         SSN: 000-00-0026   SUPPORT ISC       DOB: 01-01-1918
                  APPLIANCE/REPAIR LINE ITEM DETAIL               <4-1>

TYPE OF FORM: OTHER      INITIATOR: PROSPROVIDER,ONE    DATE: MAY 12,
1999@08:48:34
DELIVER TO:
TYPE TRANS:                  QTY: 1    SOURCE: COMMERCIAL
VENDOR:        PROSVENDOR, THREE
VENDOR PHONE:  555-555-5555
               200 VENDOR DRIVE
               LIBERTYVILLE,   ILLINOIS    60048
DELIVERY DATE: MAY 26, 1999@06:12:05
TOTAL COST: $50.00        OBL: 499-C35010-0070
REMARKS:
DISABILITY SERVED: NSC/OP
APPLIANCE: TANKS E PORTABLES
PSAS HCPCS: E0420    OXYGEN CYLINDER, DEMURRAGE O
DESCRIPTION:
EXTENDED DESCRIPTION:

Enter RETURN to continue or '^' to exit:


1. 05/12/99  1  TANKS E PO     HOLLISTER   499         05/26/99       50.00
2. 05/12/99  1  TANKS E PO     HOLLISTER   499         05/26/99       50.00

End of Home Oxygen records for this veteran!
+=Turned-In  *=Historical Data  I=Initial  X=Repair  S=Spare  R=Replacement
Enter 1-2 to show full entry, '^' to exit or `return` to continue.
```

```
       *Comments on file

       Current Disability Codes are:

       COS/B          SC VIETNAM     S/C
       AMP/LSD        SC VIETNAM     S/C                   Deleted...
       AMP/LPH        OTHERS ELIG    NSC   PL-96-151

            Select one of the following:

                    1        PATIENT DEMOGRAPHICS
                    2        CLINIC ENROLLMENTS/CORRESPONDENCE
                    3        ENTITLEMENT INFORMATION
                    4        APPLIANCE TRANSACTIONS
                    5        AUTO ADAPTIVE INFORMATION
                    6        CRITICAL COMMENTS
                    7        ADD/EDIT DISABILITY CODE
                    8        HOME OXYGEN ITEMS

       Enter 10-2319 screen to VIEW (1-8),'^' to EXIT, or 'return' to continue :
```

Purchase Card Sign Off

Use this action to sign off on a purchase card transaction. This action can also be taken using the option Billing Transactions.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Billing Month: Enter the month you want to review, e.g., 2/99, 0299, Feb 99 for February 1999.

Payment Type: Enter the method of payment for the fund control point. Payments for home oxygen are done by purchase cards or 1358 service orders. Select one of the following:
    1   1358
    P   PURCHASE CARD

Fund Control Point: Through which FCP will this purchase be handled? Enter the FCP here.

Example:

```
SITE: HINES ISC VAMC// <ret>                              499
Select BILLING MONTH:    2-1998
PAYMENT TYPE: ??

Enter 1 for 1358 or P for Purchase Card.
Choose from:
1       1358
P        PURCHASE CARD


PAYMENT TYPE: P  PURCHASE CARD
Select FUND CONTROL POINT: 910 PROSTHETIC SERVICES    P70134

Verifying all items posted for FCP. Please be patient.
Sure you want to Continue? Y  YES
Enter ELECTRONIC SIGNATURE CODE:  (Enter your signature code)         Thank you.
Cost of this request: $$$$.50
Current Control Point Balance: $$$$.50
```

Verify Posted Billing Transactions

After posting billing transactions, a bill might be posted in IFCAP but fail to be posted to the patient's 2319. Use this option as often as needed to make sure that all records get posted to the 2319.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

Billing Month: Enter the month you want to review, e.g., 2-1999, 2-99, Feb 99 for February 1999. This field only accepts months that have been posted.

Vendor: Select the vendor.

If nothing fails, you get the following notification.

```
Processing...
Everything posted okay!!
```

5. Reports

There are a number of reports to help you manage your home oxygen program.

Alphabetical List Home Oxygen Patients (by site): This is a listing of active home oxygen patients for a selected site. The report also shows the date the current prescription expires.

Active Home Oxygen Patients (Alpha by Zip Code): This is a listing of active patients with their address information.

Prescription Expiration Dates: This is a listing of active patients sorted by the expiration dates for their current prescriptions.

Inactive Home Oxygen Patients (by Inactive date): This is a listing of inactive patients and the reason they were inactivated.

Primary Item Report: This is a report of active patients listing the primary item, quantity of the item, and cost.

Monthly Home Oxygen Billing: This report lists billings for all active home oxygen patients.

New Patients: This is a report of all new patients for a selected date range.

Prescription Report: This report includes HCPCS/items, quantity, cost, extended cost, and the fund control point.

Pre-Billing Discrepancy Report: This report should be run and any discrepancies corrected prior to creating a billing list for a month. If there are any discrepancies for a patient, then that patient will not appear on the billing list.

Reports ...
Alphabetical List Home Oxygen Patients (by site)

This is an alphabetical listing of active home oxygen patients for a selected site. The report also displays the primary item, the date the patient was last activated, and the date the current prescription expires.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
MAR 3,1999  08:09          HINES ISC VAMC                 Page: 1
                      Home Oxygen Patients
                                                      Date Current
                                                      Prescription
Patient                    SSN Primary Item           Active   Expires
====================== ==== ============================== ======== ==========
PROSPATIENT2,SEVEN         7380 CONCENTRATOR               02/22/99 05/23/1999
PROSPATIENT2,EIGHT         7641 CONCENTRATOR               02/24/99 05/25/1999
PROSPATIENT2,NINE          2043 CONCENTRATOR               02/19/99 05/20/1999
...


                                            Total Patients:    8
```

Reports ...
Active Home Oxygen Patients (Alpha by Zip Code)

This is a list of addresses, sorted by the zip code, for active home oxygen patients.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
MAR 3,1999  08:25          HINES ISC VAMC                   Page: 1
                 Active Home Oxygen Patients by Zip Code

Zip Code    Name/Phone Number      SSN    Address
==========  ====================   ====   ==================================

60067       PROSPATIENT2,TEN       0210    123 Any RD
                                           Anytown ,IL

60141       PROSPATIENT3,ONE       0210    3455 WEST Any ST.
            555-555-5555                   Anyville ,IL

60148       PROSPATIENT3,TWO       0031    123 E Amystreet
                                           Anywhere ,IL

...

                                           Total Patients:    9
```

Reports ...
Prescription Expiration Dates

This list is sorted by the prescription expiration date and displays the patient, SSN, primary item, and the date the patient was last activated.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
MAR 3, 1999  09:13          HINES ISC VAMC                 Page: 1
                    Prescription Expiration Date
Date Current
Prescription
 Expires    Name                    SSN    Primary Item                    Active
==========  ======================  ====   ==============================  ========
02/23/1999 PROSPATIENT3,THREE       0033    CONCENTRATOR                    02/19/99
05/02/1999 PROSPATIENT3,FOUR        0034    CONCENTRATOR                    01/01/99
05/20/1999 PROSPATIENT2,TEN         0210    CONCENTRATOR                    02/19/99
...


                                                Total Patients:     8
```

Reports ...
Inactive Home Oxygen Patients (by Inactive date)

This is a list of inactive patients sorted by the dates the patients were inactivated.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Start at INACTIVATION DATE: This is the beginning date of the date range for the report.

Ending INACTIVATION DATE: This is the ending date of the date range for the report.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
MAR 3,1999  09:19          HINES ISC VAMC                    Page: 1
                   Inactive Home Oxygen Patients


            Date Range: SEP 04, 1998 to MAR 03, 1999

Patient              SSN    Active      Inactive   Inactive Reason
==================    ====  ==========  ========== ========================
PROSPATIENT3,SIX      0036  02/24/1999  02/24/1999 INPATIENT STATUS
PROSPATIENT3,SEVEN    0037  02/17/1999  03/02/1999 Rx EXPIRED


                                         TOTAL PATIENTS:      2
```

Reports ...
Primary Item Report

This report is sorted by the primary item and displays the patient name, SSN, primary item, quantity of the item, unit cost and total cost.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
MAR 3,1999  09:39          HINES ISC VAMC                    Page: 1
                         Primary Item Report


                                                      Unit      Total
Patient               SSN   Primary Item          Qty  Cost      Cost
=================     ====   =============================  ===  ======  ======


Primary Item: CONCENTRATOR
PROSPATIENT2,SEVEN   0027 CONCENTRATOR                1   450.00    450.00
PROSPATIENT1,TWO     0012 CONCENTRATOR                1   500.00    500.00
PROSPATIENT3,EIGHT   0196 CONCENTRATOR                1   450.00    450.00
PROSPATIENT3,NINE    0039 CONCENTRATOR                1   500.00    500.00
PROSPATIENT3,TWO     0032 CONCENTRATOR                1   500.00    500.00

Primary Item: TANKS E PORTABLES
PROSPATIENT3,TEN     0310   PROSVENDOR, FOUR          1    50.00     50.00
PROSPATIENT2,TWO     0022   PROSVENDOR, FOUR          1    50.00     50.00
PROSPATIENT1,FIVE    0015   PROSVENDOR, FOUR          1    50.00     50.00



                                        Total Patients:    8
```

Reports ...
Monthly Home Oxygen Billing

This prints a list of active patients with their home oxygen costs displayed by FCP and any suspended dollars .

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Billing Month: Enter the month and year you want shown in the report. Examples: February 1999, Feb 99, 2/99, 0299, 2-99.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
MAR 3,1999  09:46            HINES ISC VAMC                    Page: 1
                 FEB 1999 Monthly Home Oxygen Billing
                                               Station
                                             Fund Control
ACC Name                   SSN    Vendor        910    Point   Other   Susp     Total
----------------           -------  ------------------------------------------------

    PROSPATIENT3,SEVEN  0037   PROSVENDOR, THREE              200.75        -     200.75
    PROSPATIENT3,TEN    0310   PROSVENDOR, THREE              518.75        -     518.75
    PROSPATIENT4,ONE    0041   PROSVENDOR, THREE               50.00        -      50.00
a#  PROSPATIENT4,TWO    0042   PROSVENDOR, THREE              272.00        -     272.00
    PROSPATIENT4,THREE  0043   PROSVENDOR, THREE               80.00        -      80.00
                           Totals:       920.75  200.75       -        -    1121.50

                        Total Patients:    5
```

Note: **a** = accepted.
       # = posted completely
       p = partially posted (one FCP, but not both)

Reports ...
New Patients

This is a list of new patients, not necessarily new to the program but their last activation date falls within the date range selected for the report.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Start date: The default start date is the first day of the month you are in. This date may be changed to another. It is assumed the end date is "today".

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
MAR 3,1999  09:55            HINES ISC VAMC                    Page: 1
                          New Patient Report

   Patient              SSN            Primary Item          Activation Date
====================    ====  ================================  ===============
PROSPATIENT3,EIGHT      0038  CONCENTRATOR                      MAR  2,1999
PROSPATIENT1,FIVE       0015  CONCENTRATOR                      MAR  3,1999
PROSPATIENT3,TWO        0032  CONCENTRATOR                      MAR  2,1999


                                            TOTAL PATIENTS:      3
```

Reports ...
Prescription Report

This report includes HCPCS/items, quantity, cost, extended cost, and the fund control point for a selected patient or all patients.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Select All Patients? You may select all patients (YES) or a single patient (NO).

> **Prosthetics Patient**: If you choose to select a single patient, enter the patient name at this prompt. Enter the patient's name as LAST,FIRST or first initial last name plus last 4 digits of the SSN.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

```
MAR 9,1999 12:39                HINES ISC VAMC                  Page: 1
                         Prescription Report
                                             Date Current
Name                     SSN    Activation Date  Prescription Expires
================         ====   ==============   ====================
PROSPATIENT4,FOUR        0044   MAR  8,1999      JUN  6,1999
This is a full description of how much, how often and how the oxygen
should be delivered to the patient according to the prescription.


VENDOR, INC.


                                                        Fund
                                             Extended  Control
HCPCS   Item                  Qty    Unit Cost   Cost     Point
-----   ----                  ---    ---------   ----     -----
E1401   OXYGEN                 1     140.00     140.00     910
E0424   PROSVENDOR, FOUR       1      22.50      22.50     910
E0443   PROSVENDOR, FOUR       3      15.00      45.00     910
                                     Total Cost  207.50
Inactivation Date:
Inactivation Reason:
****************************************************************************

                                        Total Patients:     1
```

Reports ...
Pre-Billing Discrepancy Report

See Pre-Billing Discrepancy Report under Billing.

6. Glossary

1358	The computerized record of obligations during a set time frame. This form allows a financial obligation to be set up in the system.
2319	The computerized form on which a patient's Prosthetics data is accepted.
Accept	The act of marking a patient's monthly home oxygen bill as having been checked and correct.
Activation Date	Date the patient began home oxygen treatment. If patient becomes inactivated (see Inactivation Reason) this may also be the date the patient is reactivated.
AMA	American Medical Association.
Concentrator	A device that extracts the nitrogen from the air we breathe and outputs 88 to 93% pure oxygen for patients to breathe.
Contract Location	The site that administers the contract.
Cost	Charge per unit in dollars and cents.
CPT	Current Procedural Terminology codes published by the AMA.
Default Days to Expiration	The expiration date of the prescription will default to the contents of this field by adding this number of days to the Prescription Date when the user initially enters a new prescription.
Eligibility	Home Oxygen eligibility is one of the following: 1 = SC/OP 2 = SC/IP 3 = NSC/IP 4 = NSC/OP
Eligibility, Special Category	A subcategories of the NSC/OP: 1 = Special Legislation 2 = A & A 3 = PHC 4 = Eligibility Reform
FCP	Fund Control Point.

HCPCS	Healthcare Financing Administration Common Procedure Code System. A code that represents and item or service. Can also be PSAS HCPCS code created by the Data Validation Committee.
H.O.	Home Oxygen (From Section 3.1.3).
ICD9 Code	International Classification of Diseases code. A code that represents the primary diagnosis for which oxygen treatment is prescribed for the patient.
IEN	Internal Entry Number (From Section 3.5.2.1 – Purchase Order field).
IFCAP	The financial system in VISTA that records information about obligations, purchase cards, etc.
Inactivation Date	The date the patient's home oxygen treatment is discontinued.
Inactivation Reason	Why the treatment is cancelled or not started: D = Discontinued by Patient R = Rx Expired M = MD Discontinued P = Patient Deceased I = Inpatient Status E = Entered in Error
Item	Something that can be issued to a patient. Multiple items may be associated with one HCPCS.
Item, Primary	The item that is most important to the patient's care; denotes what kind of treatment the patient is getting. The main component of the equipment.
Item Type	A first time issue of the item, replacement of the item, or repair of the item: I = Initial issue R = Replace X = Repair
JCAHO	Joint Committee on the Accreditation of Healthcare Organizations
Liquid system	A tank of oxygen gas in liquid form.
PCO	Purchase Card Order.

PHC	Sub-category of NSC/OP Elligibility.
PO	Purchase Order.
Post	This process creates and updates a 2319. It also sends home oxygen patient billing transactions to the IFCAP system so that they will be officially recorded and paid, reducing the obligated amount available to be spent.
Prescription	A physician order for treatment/service/medication for the patient.
Prescription Date	Date that the prescription is written.
Prescription Expiration Date	Date that the prescription is no longer valid.
Prescription Sequence Number	This is the internal identification number of a prescription. Each prescription in sequence will have a different life-time. The 1st prescription may expire in 6 months, the 2nd in another 6 months, the 3rd in 12 months, the 4th in 24 months. As users enter prescriptions for patients, the system will try to calculate the correct expiration date for it based on the "Default Days to Expiration" field value.
Prosthesis	A man-made device that replaces functionality that was originally a natural capability of the body.
Quantity	The number of units issued.
SRS	Software Requirements Specification.
Suspensed	When a Home Oxygen provider bills the VAMC for services or supplies and the VAMC does not recognize the charges as liquidated and does not pay them, such charges are said to be suspensed.
Unit of Issue	How the item is issued, e.g., box, each, bottle, liter, etc.
VA	Department of Veterans Affairs.
VAMC	VA Medical Center.
Vendor	The company from which the item is purchased.
VISN	Veterans Integrated Services Network.

7. Index

Prosthetics Administrative Home Oxygen Module
User Manual