



McKesson Clinical Programs Solution™

CPS with EnterpriseRx and Pharmserv

User Guide for CPS Version 1.10.13

06/24/20

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Introduction to McKesson Clinical Programs Solution™

McKesson Clinical Programs Solution™ (CPS) enables you to drive clinical interactions between your pharmacists and patients in order to provide your patients with better clinical outcomes. CPS is designed to be an integration platform which enables bidirectional communication between your pharmacy management system and vendors of patient care and wellness monitoring services.

CPS also allows you to create and configure your own self-directed programs to manage patient care, with prompts and messages integrated directly into your pharmacy workflow activities. For example, if you'd like to help patients quit smoking, you can use CPS to enroll patients, track progress, and remind pharmacists and other staff to check in with the patients and offering counseling on an on-going basis.

Note: Access points and screen displays in this document may be different based on your Pharmacy Management System.

Features:

Connect With Service Providers of Specialized Patient Care & Wellness Programs

CPS will alert you to a patient's eligibility to enroll in a vendor program specific to their needs and allow you to capture data to be transferred directly into the fields required by the vendor application.

Build Your Own Patient Care Management Programs

Build your own (Self-Directed) patient medication management and wellness programs that will automatically display alerts to your pharmacists based on the criteria you define. Building the program is as simple as: adding and activating the program in CPS Program Builder, and configuring and enabling the program in CPS Program Admin.

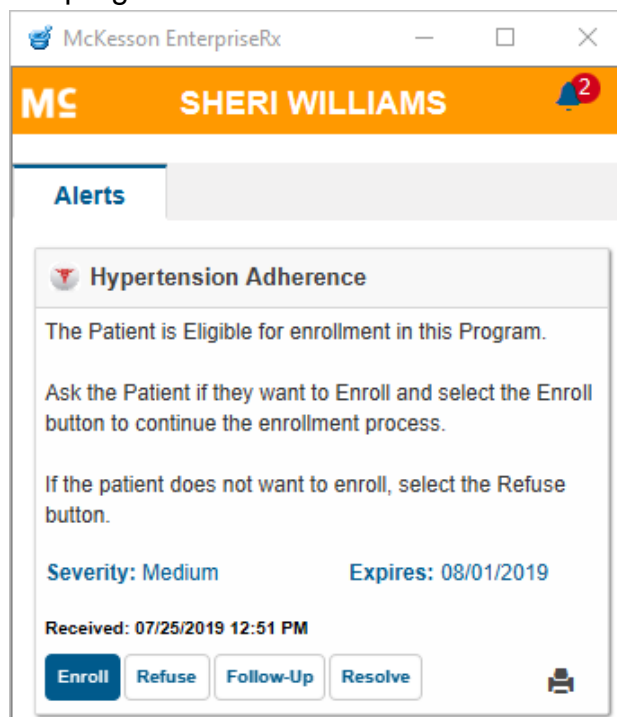


Set up programs that will alert your pharmacists to take actions such as:

- Enroll a patient into a diabetes management program
- Provide counseling on the use of asthma inhalers
- Record the blood pressure of a patient with hypertension
- Gather patient feedback on medication side effects for specialty medication
- Advise patients 60 years and older to get the shingles vaccination

Stay Abreast of Program Enrollments & Messages During Workflow

The Clinical App displays messages as they are triggered, letting your pharmacist take action on enrollments and messages as they come in during workflow. These messages may also provide direct links to vendor Web sites when a pharmacy is using a licensed vendor program.



Take Action on Program Enrollments & Messages Outside of Workflow

The CPS Task Queue gives you insight into all of the messages that have been received (for a configurable time period) so that you can take action on enrollments and messages outside of workflow. The messages displayed in this queue can be prioritized, according to the parameters you apply, so that you can deal with the most important messages first.



Task Queue

McKESSON Clinical Programs Solution About Help

Task Queue

Filter Tasks By:

Patient Name Last Name, First Name	Program Name Hypertension Adherence	Message Severity Message Severity	Message Type Message Type
Date of Birth MM/DD/YYYY	Date/Time MM/DD/YYYY	Message Status Message Status	Due MM/DD/YYYY
Phone Number Phone - (555) 555-5555	Store Number 1620	Message Text Message Text	Expiration Date MM/DD/YYYY

Filter Results

Program Name	Message Text	Patient Name	Date Of Birth	Due	Message Type	Message Severity	Received Date	Status
Hypertension Adh...	The Patient is Eligible for enrollment in t...	WILLIAMS, SHERI	12/16/1970		Enrollment	Medium	07/25/2019	Unread

You can also use this queue to query for messages by patient or facility (either your facility or the facilities for which you do load balancing) as well as other options such as:

- Program Name
- Message Severity
- Message Type
- Date/Time Received
- Message Status
- Due date
- Message Text
- Expiration Date

Note: Load balancing is not available for the Pharmserv Pharmacy Management System.

Access Your Patient's Clinical Program Data From Within the Patient Profile

The CPS Patient Profile gives you a comprehensive, patient centric, view of everything you are doing for a patient to improve their wellness.

The Patient Profile will show you all of the data that is captured from both Vendor and Self-Directed programs, in addition to the list of programs that the patient is

enrolled in, or is eligible for. The Patient Profile is your view into everything you are doing clinically for that patient.

Task Queue

McKESSON Clinical Programs Solution About Help

Filter Tasks By:

Patient Name Last Name, First Name	Program Name Program Name	Message Severity Message Severity	Message Type Message Type
Date of Birth MM/DD/YYYY	Date/Time MM/DD/YYYY	Message Status Message Status	Due MM/DD/YYYY
Phone Number Phone - (555) 555-5555	Store Number 1620	Message Text Message Text	Expiration Date MM/DD/YYYY

Reset Filter

Filter Results

Program Name	Message Text	Patient Name	Date Of Birth	Due	Message Type	Message Severity	Received Date	Status
Hypertension Adh...	The Patient is Eligible for enrollment in t...	WILLIAMS, SHERI	12/16/1970		Enrollment	Medium	07/25/2019	Unread
TherigySTM	The Patient is Eligible for enrollment in t...	WILLIAMS, SHERI	12/16/1970		Enrollment	Medium	07/25/2019	Unread

If using EnterpriseRx, use the **Clinical Programs** tab to view and act on patient information such as:

- The Standard Patient Health Values
- Program Enrollments
- Program Messages

If using Pharmserv, select the CPS patient vertical toolbar button in Pharmacy Maintenance to access this information.

Building Clinical Programs

The building and configuration of a self-directed clinical program is highly customizable. Depending on your needs, you may choose not to use all of the fields and options available to you. The steps below outline only one example of how a program can be built.

Note: Only self-directed programs need to be built in CPS Program Builder. Vendor programs are built by McKesson.

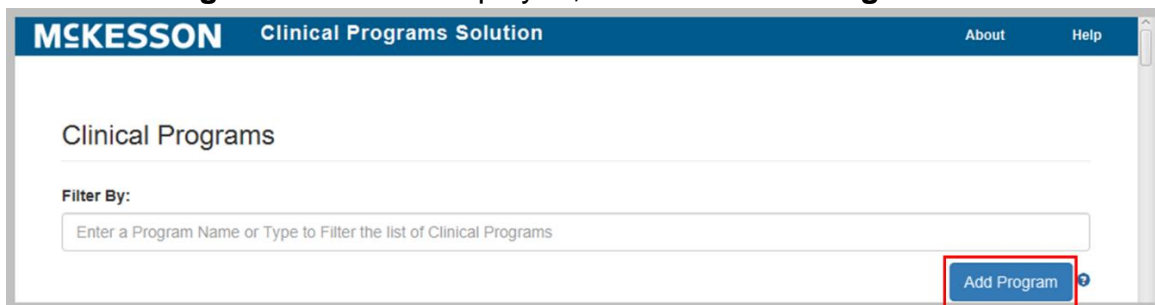
Steps to Building a Self-Directed Clinical Program:

- [Getting Started with Program Builder](#)
- [Selecting a Program Logo & Icon](#)
- [Naming the Program & Entering a Program Description](#)
- [Choosing a Program Enrollment Type](#)
- [Entering Therapeutic Program Codes](#)
- [Building Program Messages](#)
- [Building Program Questionnaires](#)
- [Modifying Program Questionnaires](#)
- [Saving a Program](#)

Getting Started with Program Builder

To get started, navigate to **CPS Program Builder**.

Once **CPS Program Builder** is displayed, select the **Add Program** button.

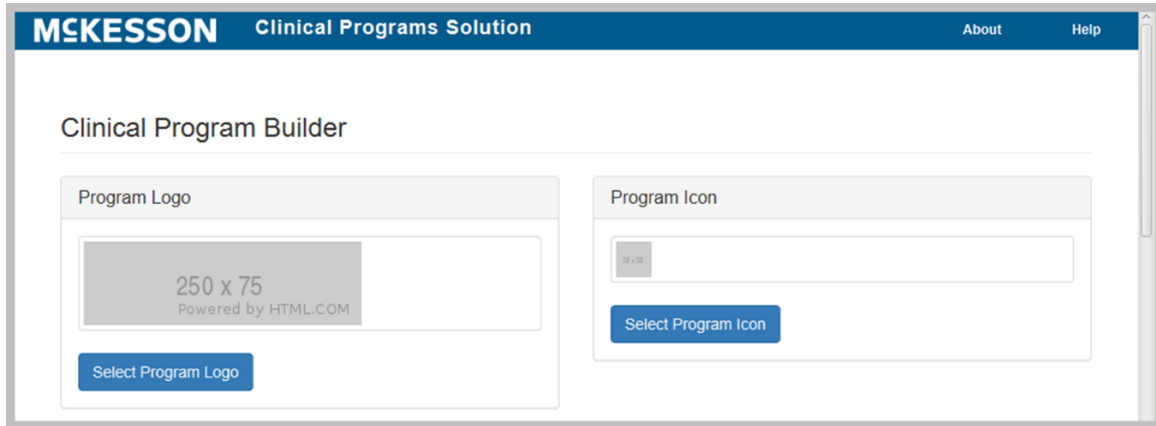


Note: There are multiple areas within the Clinical Program Builder screen that allow the user to create a program that is tailored to their specific needs. Users will use the scroll bar in the screen to move between areas. Each of these areas will be described individually.

Note: Field names preceded by an asterisk (*) are required fields.

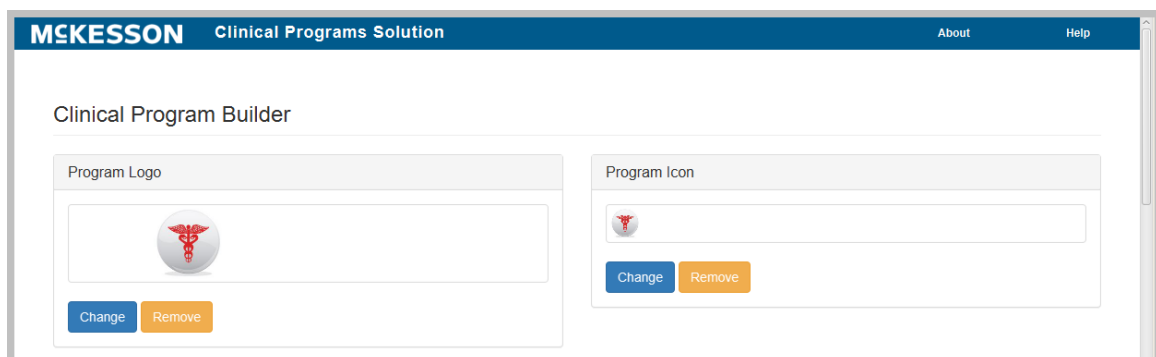
Selecting a Program Logo & Icon

Program logos and icons are not required; however adding images will improve the visibility of the program in the Pharmacy Management System.



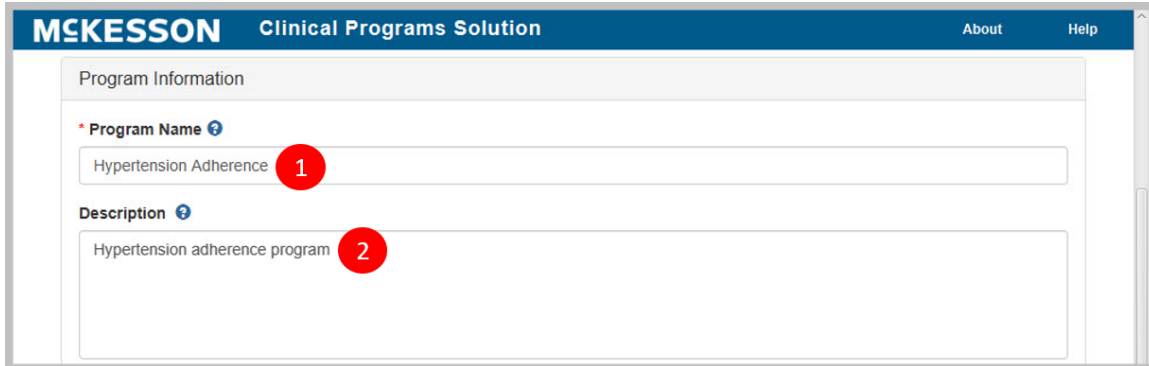
To Add a Program Logo: Select the **Select Program Logo** button and follow the prompts to select the image file from the local hard drive. This logo will display at various places in the Pharmacy Management platform, such as the Patient Profile, and allow users to easily identify the program. The program logo image will be 250 pixels wide x 75 pixels high and the file format can be .gif, .png or .jpg.

To Add a Program Icon: Select the **Select Program Icon** button and follow the prompts to select the image file from the local hard drive. This icon will display in various places in the Pharmacy Management platform, including the Clinical App, and allow users to easily identify the program. The program icon will display at 16 pixels wide x 16 pixels high and the file format can be in .gif, .png or .jpg.



Naming the Program & Entering a Program Description

A unique program name is required in order to save the program.



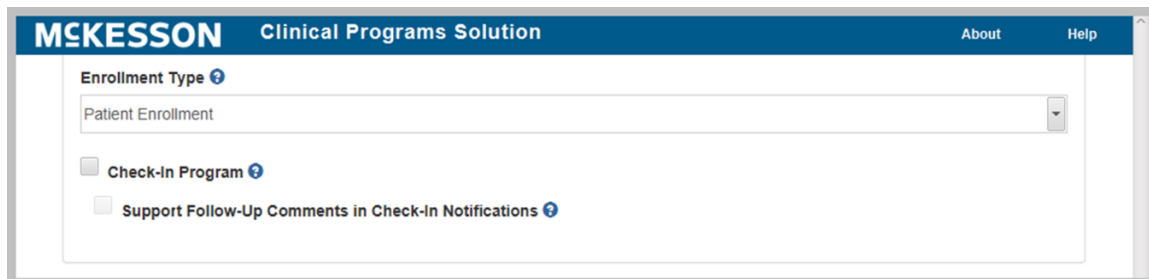
The screenshot shows the 'Program Information' section of the McKesson Clinical Programs Solution interface. It features two main input fields: 'Program Name' and 'Description'. The 'Program Name' field contains the text 'Hypertension Adherence' and is highlighted with a red circle containing the number '1'. The 'Description' field contains the text 'Hypertension adherence program' and is highlighted with a red circle containing the number '2'. The interface includes a blue header with the McKesson logo and 'Clinical Programs Solution' text, and 'About' and 'Help' links in the top right corner.

- 1) To Name the Program: Enter a program name into the **Program Name** text field. This field is limited to 60 alphanumeric characters and no two programs can be saved with the same name.
- 2) To Enter a Program Description: Enter the program description into the **Description** text box. The program description is not required; however, this text will display in CPS Program Builder, CPS Program Admin, the questionnaire, if applicable, and the CPS Patient Profile, and describes the purpose of the program. This field is limited to 600 characters.

Choosing a Program Enrollment Type

There are 2 Program Enrollment Types:

1. An **Enrollment Type** of **Patient Enrollment** will require users to ask the patient if they would like to enroll in the program.
2. An **Enrollment Type** of **No Enrollment** will not require users to ask the patient for his/her approval to enroll in a program.



The screenshot shows the 'Enrollment Type' section of the McKesson Clinical Programs Solution interface. It features a dropdown menu currently set to 'Patient Enrollment'. Below the dropdown are two checkboxes: 'Check-In Program' and 'Support Follow-Up Comments in Check-In Notifications', both of which are currently unchecked. The interface includes a blue header with the McKesson logo and 'Clinical Programs Solution' text, and 'About' and 'Help' links in the top right corner.

To Choose an **Enrollment Type**: Use the **Enrollment Type** drop down menu to choose **Patient Enrollment** or **No Enrollment**.

Note: You might choose **No Enrollment** for a one-time program where patient data collection is not necessary. For example, you might set up messages to remind the

pharmacist to counsel patients the first time a certain medication is filled. You might choose **Patient Enrollment** for an ongoing program where you want to collect patient data over a period of time. For example, you might want to provide ongoing counseling for patients with diabetes whenever they come in to pick up their diabetes medication refills.

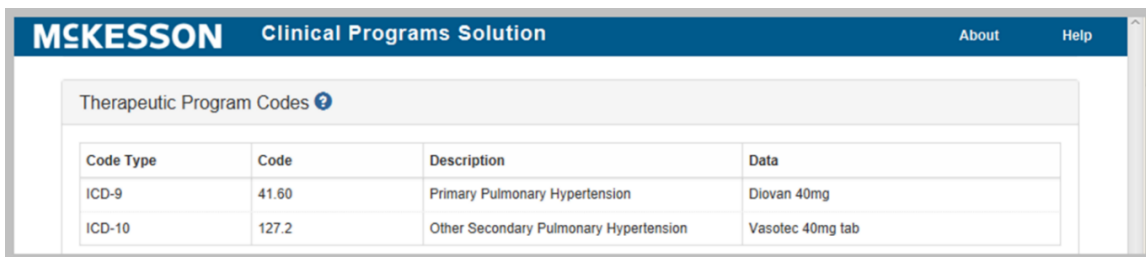
When **Patient Enrollment** is selected in the **Enrollment Type** drop down, the **Check-In Program** and **Support Follow-Up Comments in Check-In Notifications** checkboxes will display. The **Check-In Program** and **Support Follow-Up Comments in Check-In Notifications** checkboxes are only available for selection if you have the CPS Premium subscription. If you do not have the CPS Premium subscription, the checkboxes will be disabled. Please contact your Account Manager/Executive for more information on the Check-In program feature.

Entering Therapeutic Program Codes

Therapeutic Program Codes can be entered in Program Builder to allow for the association of certain program codes to your program. Therapeutic Program Codes appear in the program’s questionnaire and capture additional data for the program. Therapeutic codes are not required for the creation of a Self-Directed program. Following are some examples which illustrate the use of Therapeutic Program Codes in Clinical Programs.

Therapeutic Program Codes Example #1:

An example of Therapeutic Program Code use is a Hypertension Management Program, where the following codes were set up in Program Builder:



Code Type	Code	Description	Data
ICD-9	41.60	Primary Pulmonary Hypertension	Diovan 40mg
ICD-10	127.2	Other Secondary Pulmonary Hypertension	Vasotec 40mg tab

The program could then be designed to require questions or data fields along with the Therapeutic Codes that need to be filled in order to complete a questionnaire.

Therapeutic Program Codes Example #2:

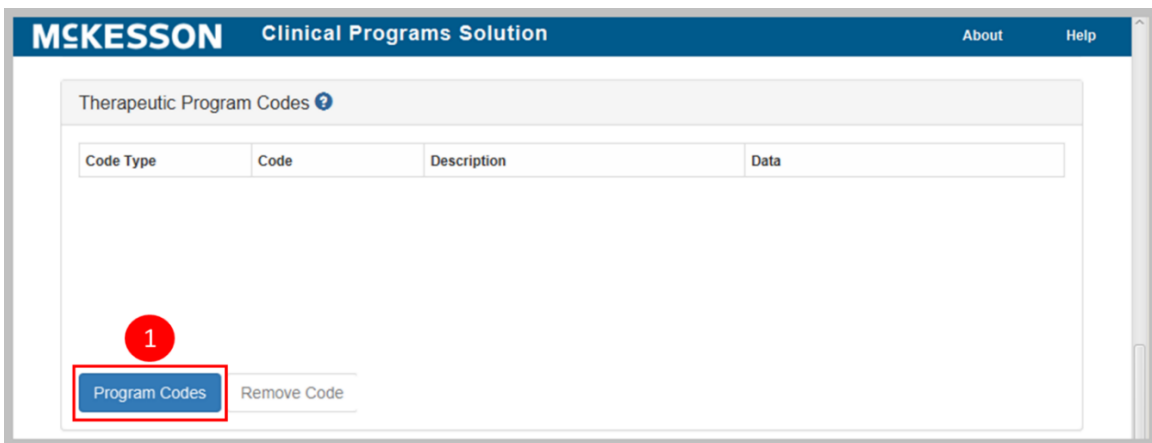
Another example could be a Pain Management Program administered by the Pharmacy. The Pharmacy may have existing plan data that they want to track and collect, or they might design something totally custom.

The Custom Code Type could be any code, description, or data that the program requires. For example:

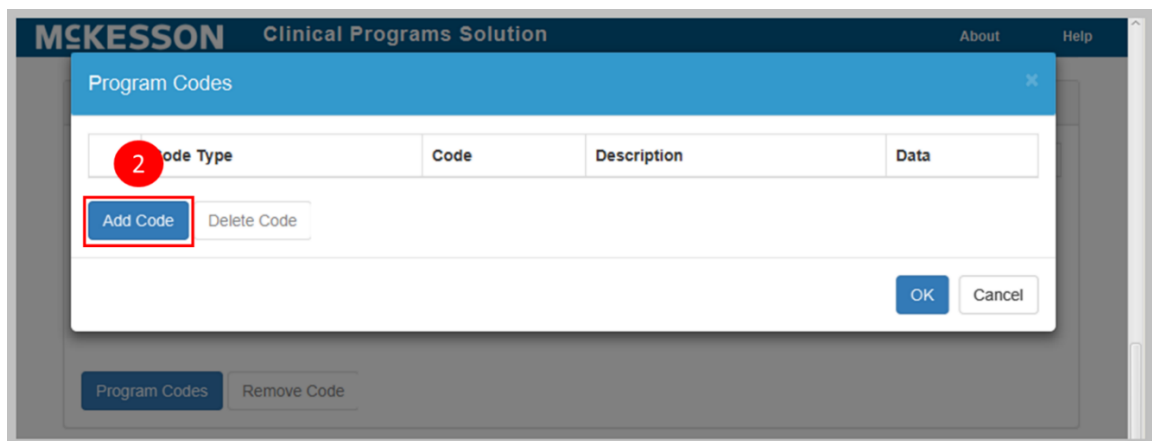


Code Type	Code	Description	Data
Custom	420	Pain Management	OxyContin
Custom	421	Pain Management	Hydrocodone
Custom	422	Pain Management	Vicodin

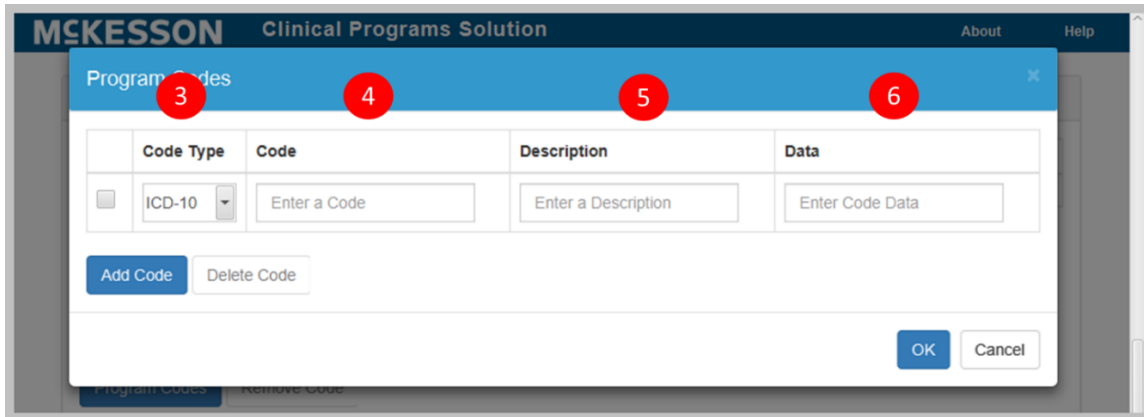
To Enter Therapeutic Program Codes:



1) Select the **Program Codes** button.

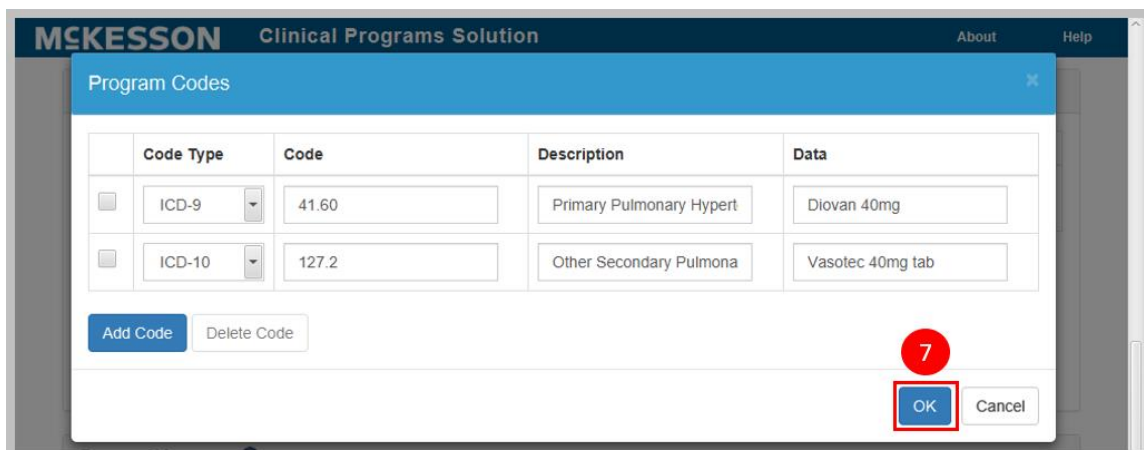


2) Select the **Add Code** button.

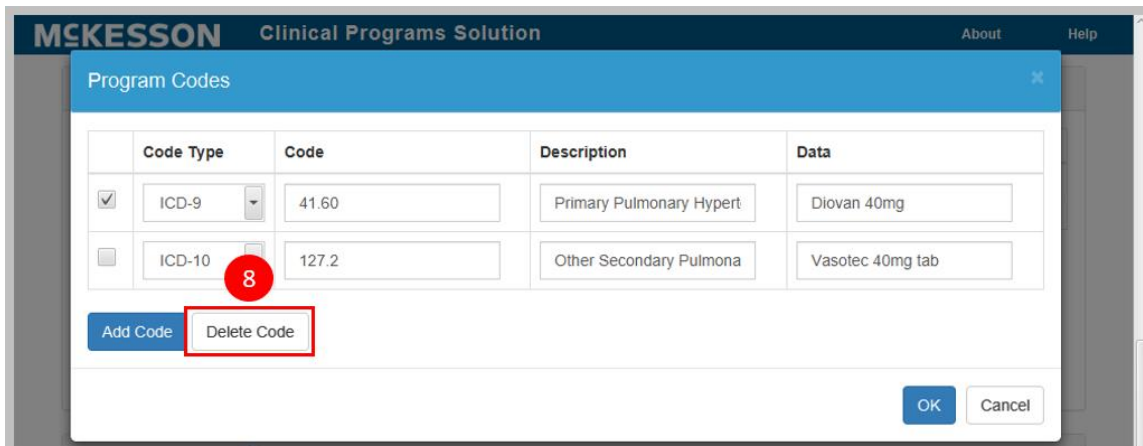


- 3) Choose whether the code is an **ICD-9**, **ICD-10** or **Custom Code** in the **Code Type** drop down. The default is ICD-10.
- 4) Enter the code in the **Code** field.
- 5) Enter a code description in the **Description** text box. This field is not required to save the code.
- 6) Enter the data in the **Data** field with which you want to associate the Therapeutic Code, e.g., an NDC number or drug name, if you want to associate such with each ICD number. This field is not required to save the code.

Note: To enter more Therapeutic Codes, repeat steps two to six.



- 7) After all of the Therapeutic Codes have been entered, select the **OK** button.

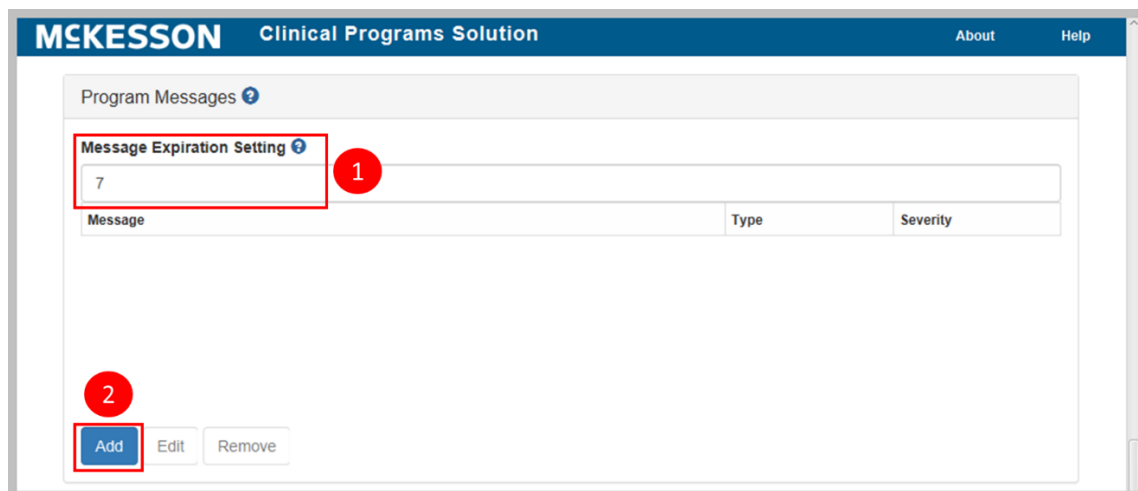


- 8) In order to remove a Therapeutic Code, select the check box of the desired code and then select the **Delete Code** button.

Building Program Messages

Program messages are the messages that will be displayed to users and can prompt the user to have a patient interaction, e.g., provide counseling on dosing to the patient or gather patient's vital data.

To build program messages:



- 1) The **Message Expiration Setting** text box allows the user to set the number of days that the messages will continue to display in the Clinical App and Task Queue. The range is 1 to 999. The system default for this field is seven days.
- 2) Select the **Add** button.

- 3) Use the **Message Type** drop-down to choose whether the message type is **Standard** or **Questionnaire**. The default is **Standard**.

Note: CPS Program Builder allows for one questionnaire to be built within each program; however, users can enter more than one message with a message type of **Questionnaire**. Any messages designated as a **Questionnaire** message type will display to the user and provide access to the questionnaire set up in the **Questionnaire Builder** section below. The system will allow for the triggering of the same form repeatedly, but with different message text to the user. This is so that users can collect data on an ongoing basis.

If you choose a **Standard** message type, this will operate as a message to your user, but not trigger the questionnaire. You may choose this option in a situation where you want to remind your staff to counsel a patient on his/her medication, but do not need to collect any data associated with this transaction.

- 4) Enter the message text in the **Enter Message Text Here** field. While the character limit for this field is 8,000 characters, messages are typically kept

short to allow for quick reading. You can also apply formatting to the message's text using the field's format editor.

- 5) Use the **Message Severity** drop-down to set message severity. Messages displayed throughout the system will be prioritized based on the severity chosen here. The default is **Low**.
- 6) If there is a need to have a particular message override the **Message Expiration Setting** specified on the **Clinical Program Builder**, enter the number of days from 1-999 in the **Message Expiration Setting Override** field.

Note: You may want to use this setting if you have more than one message and want the messages to expire at different times.

- 7) Select the **Generate On Enrollment** checkbox if you want this message to automatically generate and display in the Clinical App and Task Queue upon patient enrollment. Any number of Standard and/or Questionnaire messages can be set to generate on enrollment for a given Self-Directed program.
- 8) Enter a quick identifier for the message in the **Message Tag** field. The **Message Tag** field supports up to, and including 30 characters and must be unique across all program messages for the program. Although not required, if no **Message Tag** is provided for a message when the program is saved, a **Message Tag** will be systematically assigned to the message.

Note: The systematically assigned **Message Tag** will consist of the program's initials (first letter of the first word in the program's name, followed by the first letter of the last word in the program's name) and a numeric identifier (ex. 1, 2, 3, ..., x). If the program's name is only one word, the program's initials will just be one letter (the first letter of the program's name).

Note: If a patient is unenrolled from a given program, and then re-enrolled in the same program:

- If the patient already has an unexpired, unresolved message for that program, a message will not be generated to avoid duplication.
- If the patient had a message that expired or was resolved for that program, a new message will be generated.

Note: Repeat steps 2 through 9 above until all program messages have been added

- 9) Once the message has been built, select the **OK** button and the system will return to the Clinical Program Builder screen.



McKESSON Clinical Programs Solution
About Help

Program Messages ?

Message Expiration Setting ?

7

Message	Type	Severity
Are you currently on a medication for high blood pressure?	Questionnaire	High
Have you taken this medication, or another medication for high blood pressure before?	Questionnaire	High

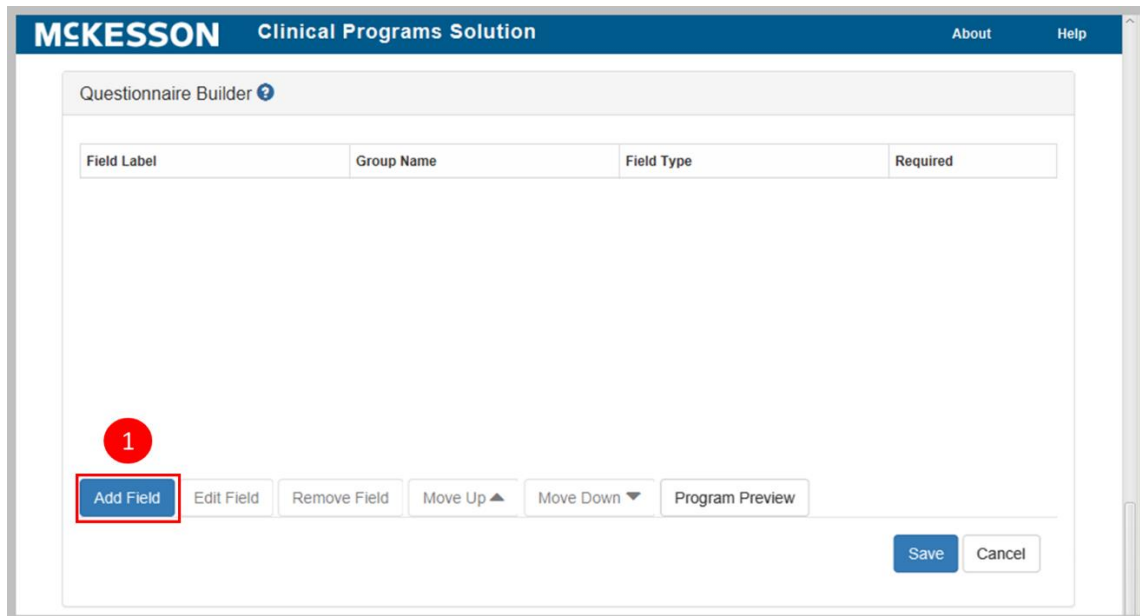
Add
Edit
Remove

Building Questionnaires

The **Questionnaire Builder** allows for the building of a questionnaire, which will be attached to any program messages with a **Message Type** of **Questionnaire**. If you selected an **Enrollment Type** of **Patient Enrollment** for this program, this questionnaire will be attached to any associated enrollment messages. Questionnaires are built by adding and customizing each field, one at a time.



To build a questionnaire:



1) Select the **Add Field** button.

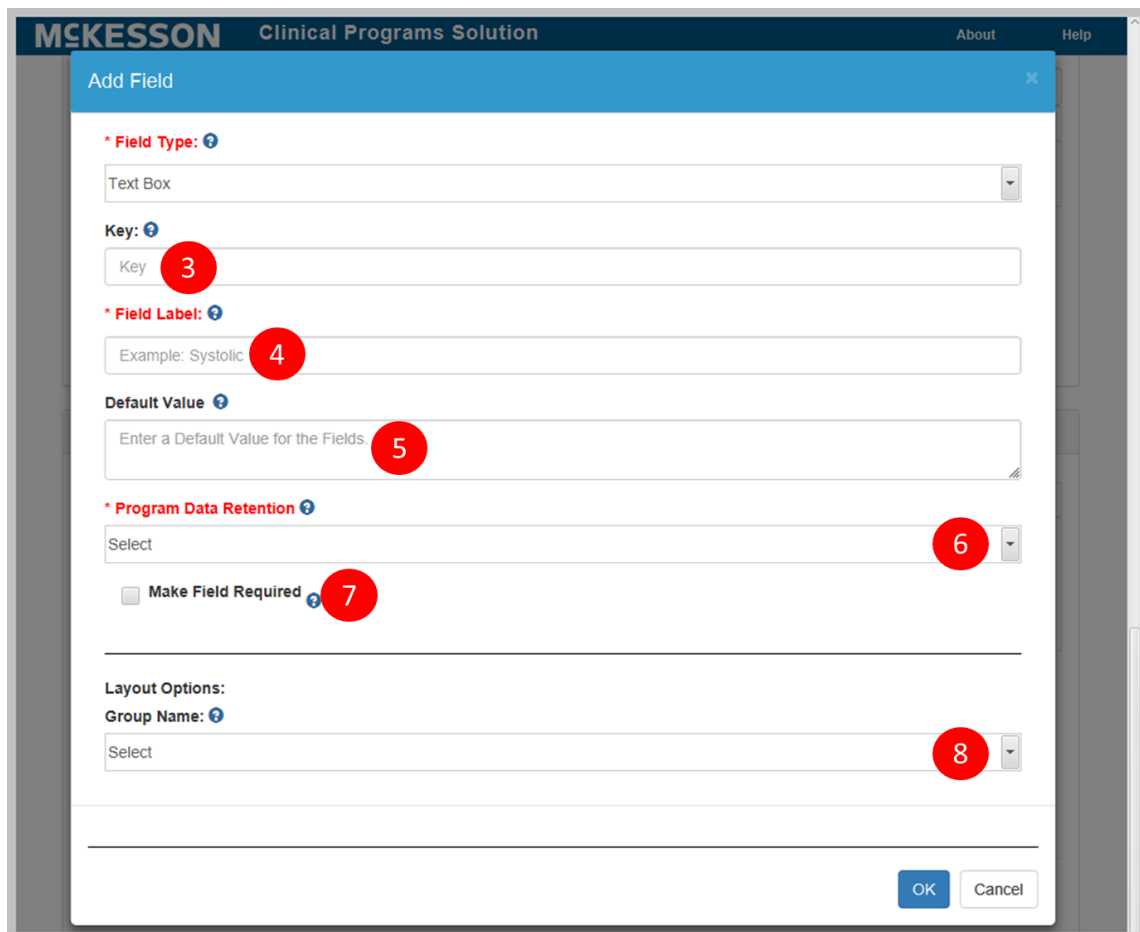


2) Use the **Field Type** drop down to select the field type. This selection will determine the rest of the options available in the field builder. The following field types are available in this drop down:

- Text Field
- Text Box
- Radio Button Group
- Check Box Group
- Separator
- Number
- Currency
- Date and Time
- Date
- Time

- Read Only Text Box
- Special Key

The example below shows the options the user will see if the **Text Box** field type option has been selected.



The screenshot shows the 'Add Field' dialog box with the following fields and their highlighted numbers:

- Field Type:** Text Box
- Key:** Key (3)
- Field Label:** Example: Systolic (4)
- Default Value:** Enter a Default Value for the Fields (5)
- Program Data Retention:** Select (6)
- Make Field Required:** (7)
- Layout Options:** Group Name: Select (8)

Buttons: OK, Cancel

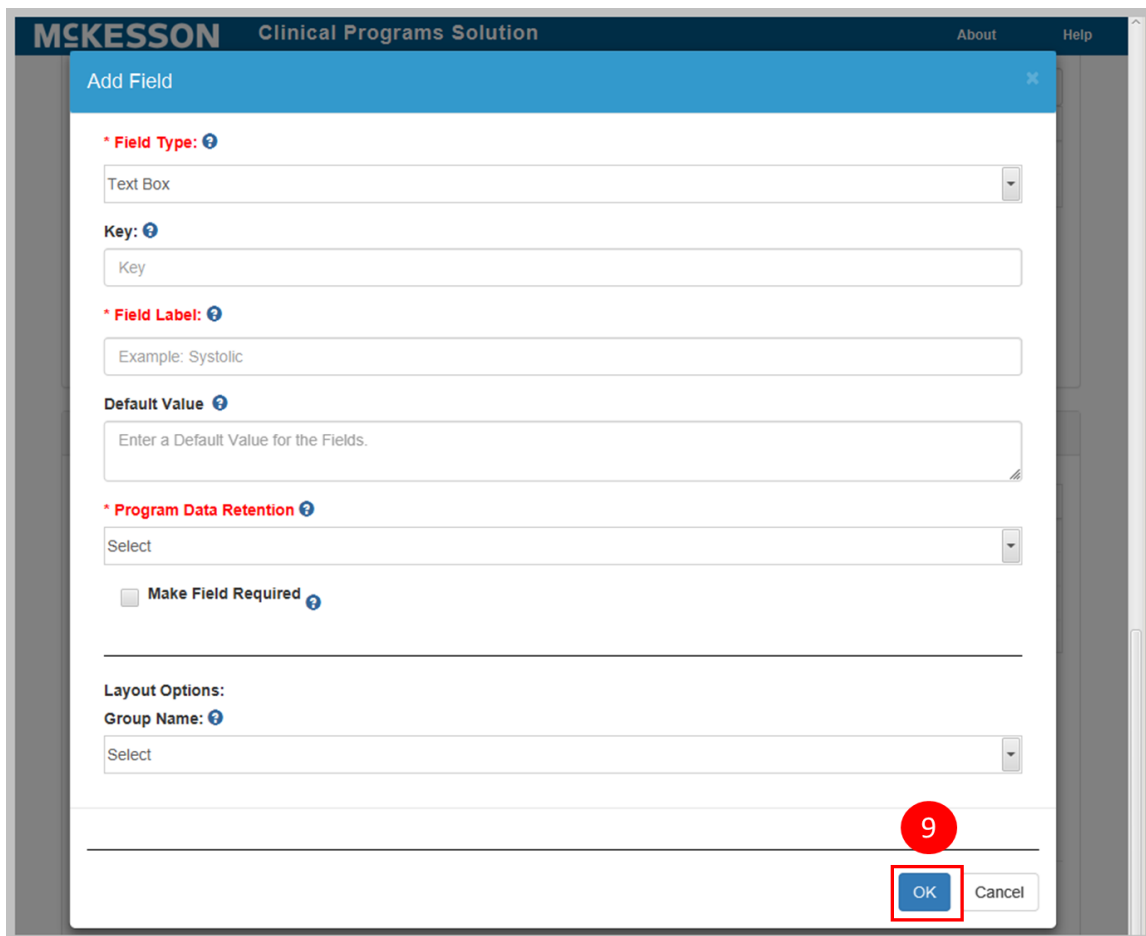
- 3) Enter the key value in the **Key** field.

Note: The **Key** field allows the user to assign a value to the field. The value could refer to something like a database key value for the program. Although this field is not required, the system will auto-generate a key value if no value is entered.

- 4) Type in the label for the field into the **Field Label** field.
- 5) Use the **Default Value** field to select a default value. This field is not required.
- 6) Use the **Program Data Retention** drop down to select whether or not the data in this field will save to the patient profile.

- 7) If desired, use the **Make Field Required** check box to make the population of this field required in order to resolve the questionnaire.
- 8) Enter a group name for the field in the **Group Name** field. This field is not required.

Note: Use the **Group Name** field for designing a questionnaire where questions are grouped together under a common header, such as grouping all blood work fields under the group name "Diagnostics."



The screenshot shows the 'Add Field' dialog box in the McKesson Clinical Programs Solution software. The dialog box has a blue header with the text 'Add Field' and a close button. Below the header, there are several fields and options:

- * Field Type:** A dropdown menu with 'Text Box' selected.
- Key:** A text input field with 'Key' entered.
- * Field Label:** A text input field with 'Example: Systolic' entered.
- Default Value:** A text input field with the placeholder text 'Enter a Default Value for the Fields.'
- * Program Data Retention:** A dropdown menu with 'Select' selected.
- Make Field Required:** A checkbox that is currently unchecked.
- Layout Options:** A section containing a **Group Name:** dropdown menu with 'Select' selected.

At the bottom right of the dialog box, there are two buttons: 'OK' and 'Cancel'. The 'OK' button is highlighted with a red box, and a red circle with the number '9' is positioned above it, indicating the step number for selecting this button.

- 9) Select the **OK** button to add the field to the questionnaire.

To add more fields to the form, return to step one above and repeat the remaining steps as applicable to the field type.

Modifying Questionnaires

After inputting all of the fields, modifications can be made to the questionnaire by using the buttons located at the bottom of the **Questionnaire Builder**.

McKESSON Clinical Programs Solution About Help

Questionnaire Builder ?

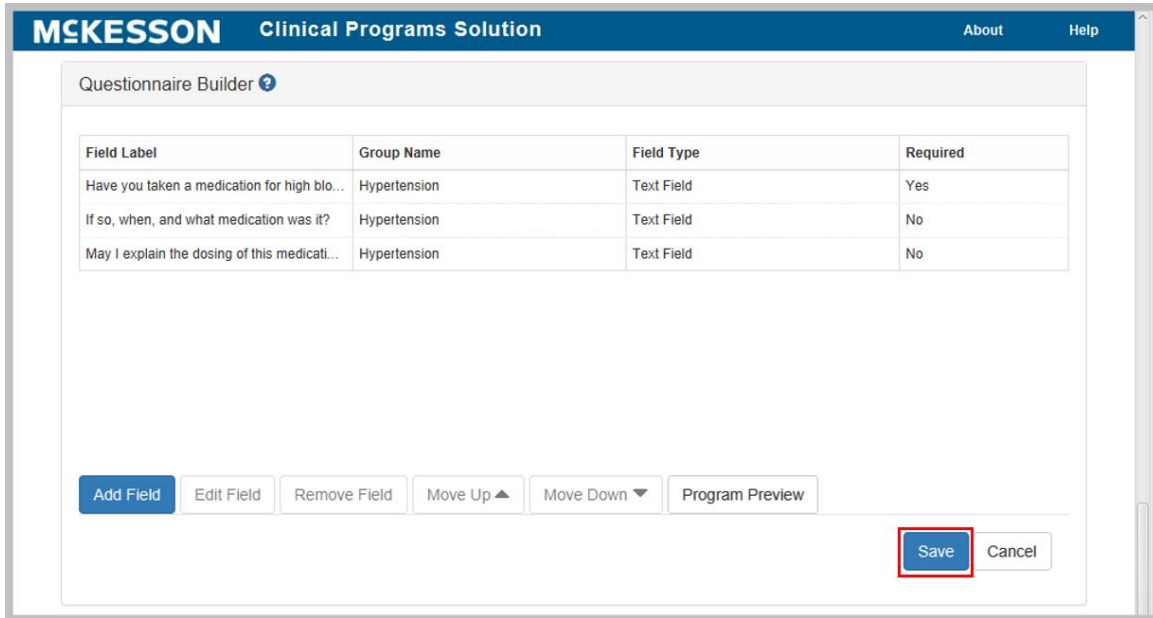
Field Label	Group Name	Field Type	Required
Have you taken a medication for high blo...	Hypertension	Text Field	Yes
If so, when, and what medication was it?	Hypertension	Text Field	No
May I explain the dosing of this medicati...	Hypertension	Text Field	No

Add Field Edit Field Remove Field Move Up ▲ Move Down ▼ Program Preview

Save Cancel

- **Edit Field:** Change any of the field options set in the exercise above by selecting the field and using the **Edit Field** button.
- **Remove Field:** Remove a field entirely by selecting the field and using the **Remove Field** button.
- **Moving Fields:** Change the order of the fields by selecting the field to be moved and using the **Move Up** or **Move Down** buttons.
- **Program Preview:** Preview the questionnaire by using the **Program Preview** button to ensure the questionnaire has been built correctly.

Saving the Program



McKesson Clinical Programs Solution About Help

Questionnaire Builder ?

Field Label	Group Name	Field Type	Required
Have you taken a medication for high blo...	Hypertension	Text Field	Yes
If so, when, and what medication was it?	Hypertension	Text Field	No
May I explain the dosing of this medicati...	Hypertension	Text Field	No

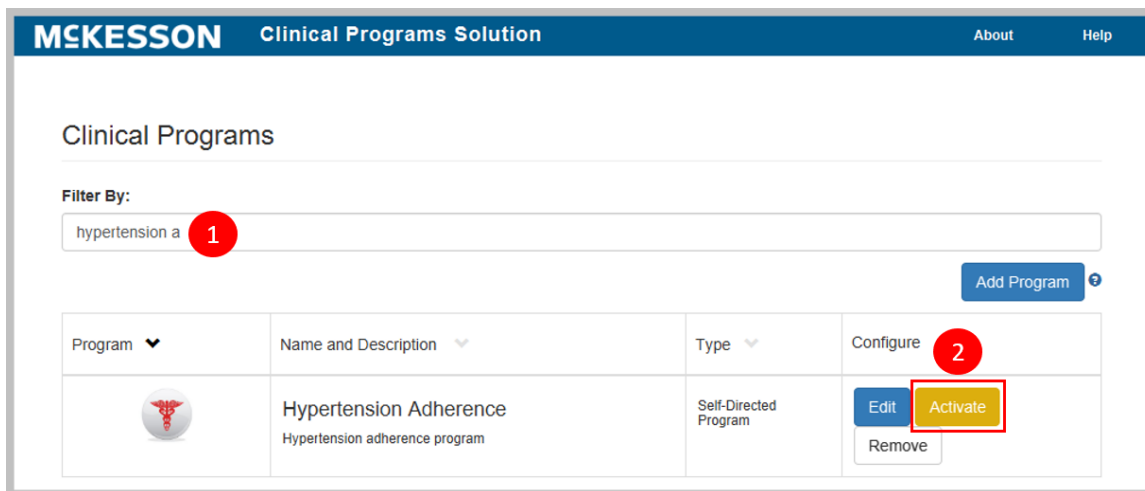
Add Field Edit Field Remove Field Move Up ▲ Move Down ▼ Program Preview

Save Cancel

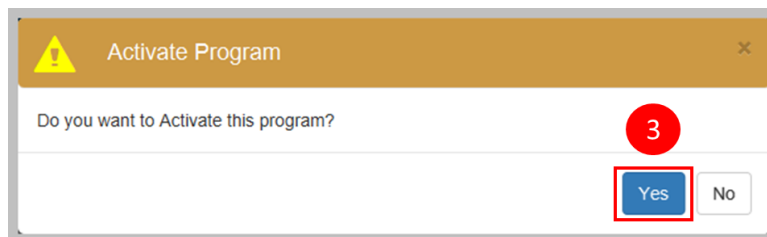
When all fields have been added, save your program by selecting the **Save** button at the bottom of the CPS Program Builder page, or **Cancel** to discard the changes. Once you've finished building your program you're ready to move on to "[Activating Clinical Programs](#)."

Activating Clinical Programs

After building a self-directed program, the next step is to activate it. To activate the program, navigate to CPS Program Builder.



- 1) Type the program name into the **Filter By** text box. If several names begin with the same character string, they will all show in the list. The more characters that are entered into the filter, the fewer entries that will be contained in the list.
- 2) When the program displays in the list, select the **Activate** button.



- 3) Select **Yes** from the pop-up window to activate the program

After activating the program, the next step is to configure it. Go to ["Configuring Clinical Programs"](#) to continue.



Configuring Clinical Programs

After a program has been built and activated, the next step is to configure it. This is where the triggers for messages will be set up for the program; in other words, you will configure what data input by the user will cause a CPS program message to be displayed in the system. For example, when a certain NDC is filled the program will display a message to the user.

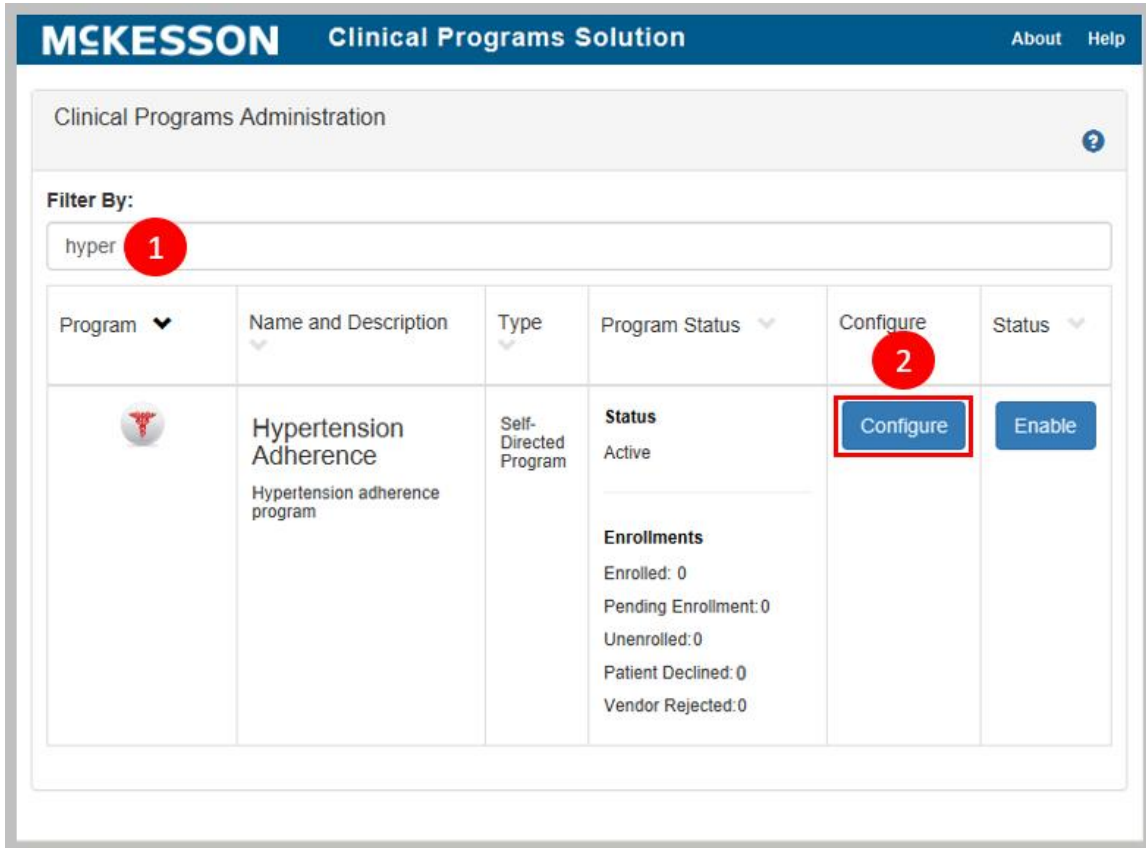
Note: This is also the area in which triggers for a vendor program will be set up. The instructions below will not give you specific details about the filters you need to set up for vendor programs, but it will outline how filters are set up in general. Contact the vendor directly to configure the specific filters needed for a vendor program.

Steps for Configuring a Clinical Program

- [Getting Started with Program Configuration](#)
- [Setting up Data Filters for Program Enrollments](#)
- [Setting the Time Period to Re-ask Patients to Enroll](#)
- [Setting the Due Date Reminder for Enrollmant Messages](#)
- [Setting up Data Filters for Program Messages](#)
- [Bulk Messaging Patients Outside of Prescription Processing](#)
- [Bulk Enrolling Patients into Your Self-Directed Program](#)
- [Saving Program Configuration](#)

Getting Started with Program Configuration

Navigate to CPS Program Admin.



- 1) Type the program name into the **Filter By** text field. If several names begin with the same character string, they will all show in the list. The more characters that are entered into the filter, the fewer entries that will be contained in the list.
- 2) Select the **Configure** button next to the program when it displays in the list.

Setting up Data Filters for Program Enrollments

The data filters in the Patient Enrollment portion of the screen are the filters you set up to determine the enrollment criteria for your program. When the criteria have been met, an enrollment message will be triggered during workflow.

Note: You will only see the **Edit Data Filter** button in the **Patient Enrollment** section for programs with an **Enrollment Type** of **Patient Enrollment** (not for those with an **Enrollment Type** of **No Enrollment**).

Data Filter Operators

The following operators are available for use when creating data filters for your program:

- = (Filters for items with a value that is equal to the value entered in the **Value** field.)
- != (Filters for items with a value that is not equal to the value entered in the **Value** field.)
- <= (Filters for items with a value that is less than or equal to the value entered in the **Value** field.)
- >= (Filters for items with a value that is greater than or equal to the value entered in the **Value** field.)
- < (Filters for items with a value that is less than the value entered in the **Value** field.)
- > (Filters for items with a value that is greater than the value entered in the **Value** field.)
- IN (Filters for items that match the value/s defined in the **Value** field.)
- NOTIN (Filters for items that do not match the value/s defined in the **Value** field.)
- STARTS WITH (Filters for items that start with the value entered in the **Value** field.)

Note: For entries in the value field:

- Text/name entries in the Value field are case sensitive. For example: a filter is created so that the written product name starts with “dio.” If the product selected is Diovan, the filter will not match.
- The entire name of a medication must be entered if a direct match is desired by utilizing the equal sign operator. For example: a filter is created so that the written product is equal to “Diovan.” If the product selected is “Diovan 40mg tab,” the filter will not match.
- If NDC numbers are entered, the hyphens must be omitted.



For self-directed programs, you'll be making your own decisions on what your filters include. Below is an example of a simple filter and a couple of more complex filters to give you an illustration of some of the different options available.



For customers that leverage First Databank (FDB), when adding a GCN data filter, ensure that leading zeros **are not included** in the GCN(s) [example: correct GCN = 1234; incorrect GCN = 01234]. For customers leveraging Medi-Span, the leading zero **must be included** when adding a GPI data filter [example: correct GPI = 01234567890000; incorrect GPI = 1234567890000].

Example Data Filter for First Databank (FDB):

Data Filter

Dispensed Product.GPI GCN = 1234

Add Data Filter Rules to Trigger Events ⚙

(	Data	Attribute	Operator	Value	)	Connector
<input type="checkbox"/>	Dispensed Product	GPI GCN	=	1234 <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do not add leading zero(s) if present, if leveraging First Databank

Example Data Filter for Medi-Span:

Data Filter

Dispensed Product.GPI GCN = 01234567890000

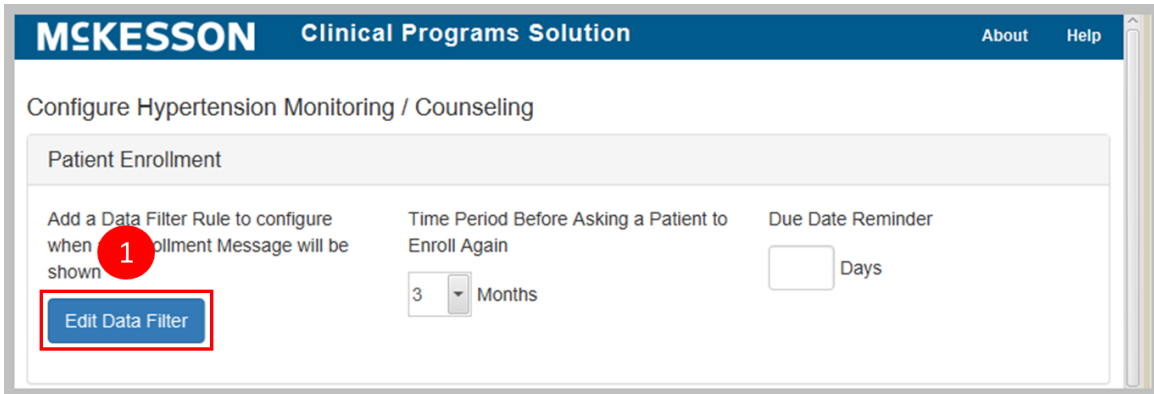
Add Data Filter Rules to Trigger Events ⚙

(	Data	Attribute	Operator	Value	)	Connector
<input type="checkbox"/>	Dispensed Product	GPI GCN	=	01234567890000 <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

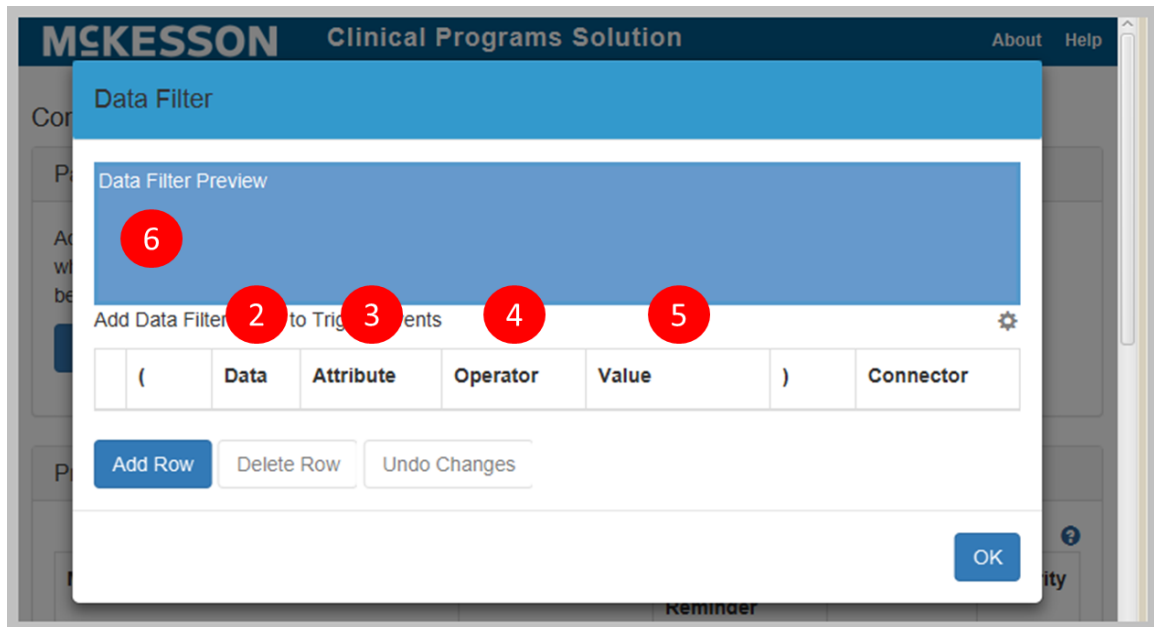
Add leading zero if present, if leveraging Medi-Span

Simple Filter Example:

First, we will set up a very simple filter, which will trigger an enrollment when the prescription is for a specific written product (NDC Number 11 digits):



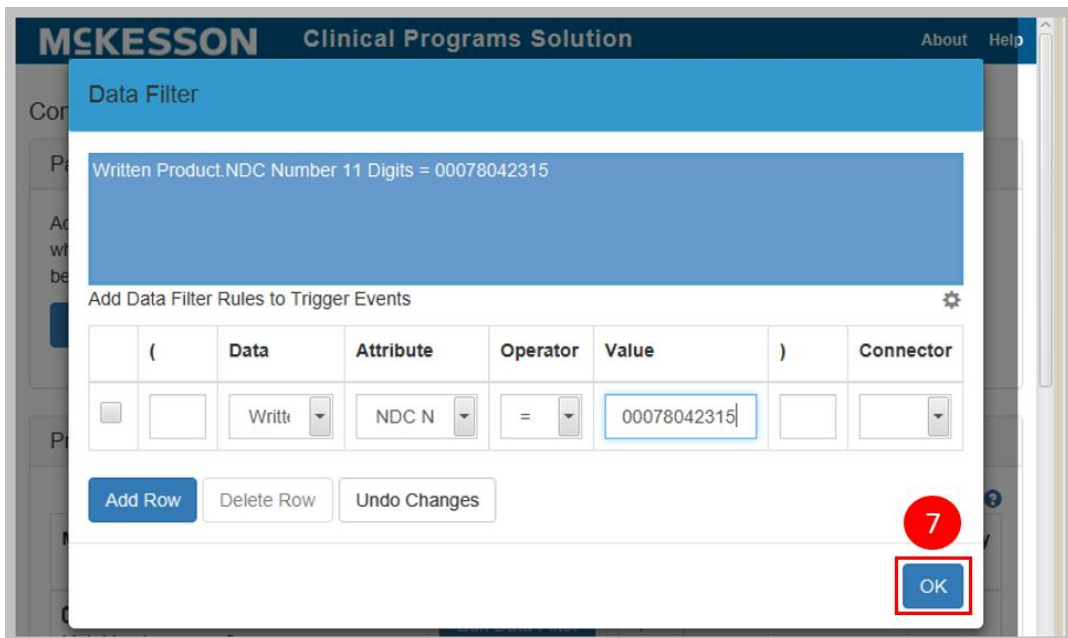
- 1) Select the **Edit Data Filter** button to get started configuring the data filters.



- 2) Select the Add Row button to add a new row to the data filter.
- 3) Use the **Data** drop down to choose the data which, when the user inputs it into the system, will trigger the enrollment message. In this example, we've used **Written Product**.

- 3) Next, use the **Attribute** drop down to choose an attribute. The input made in the **Data** field in step three will determine the available options in the drop down menu. For this example, we've used the attribute **Product Name**.
- 4) Choose the **Operator**. In this example we want to trigger an enrollment for our Hypertension monitoring program every time certain types of hypertension medications are filled and have chosen the '=' operator here.
- 5) Enter the value into the **Value** field.
- 6) Check the blue text box above your data filter and ensure that your filter has been configured correctly.

Note: Select the **Undo Changes** button to clear any changes you've made to the data filter.

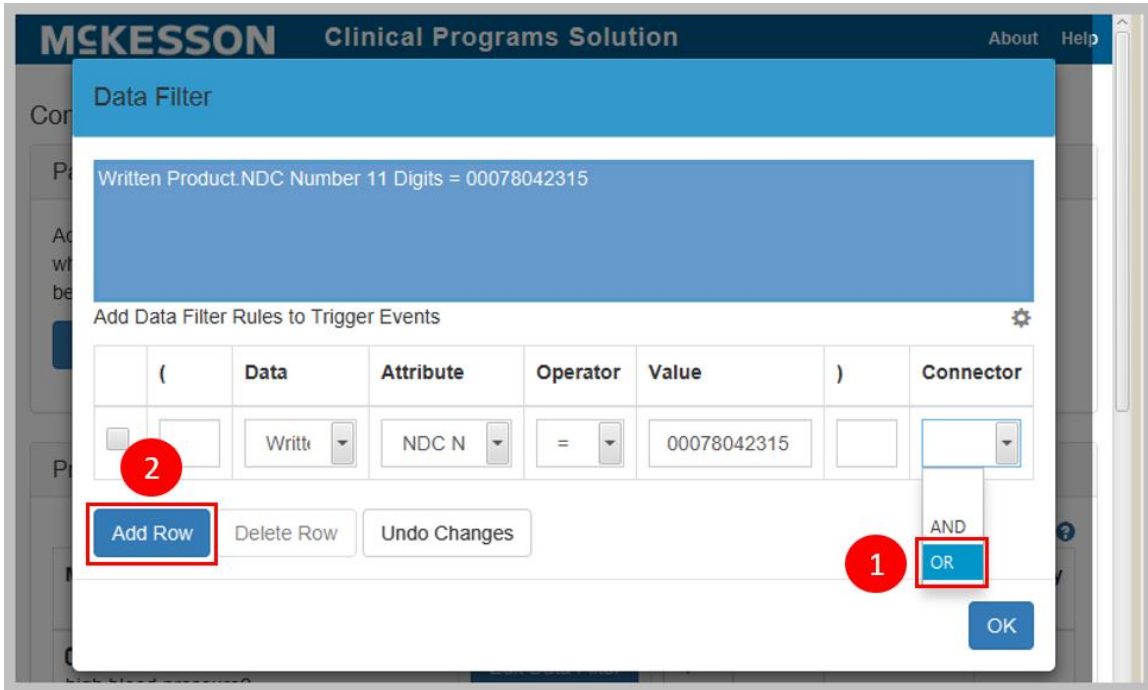


- 7) Select **OK** to add the filter.

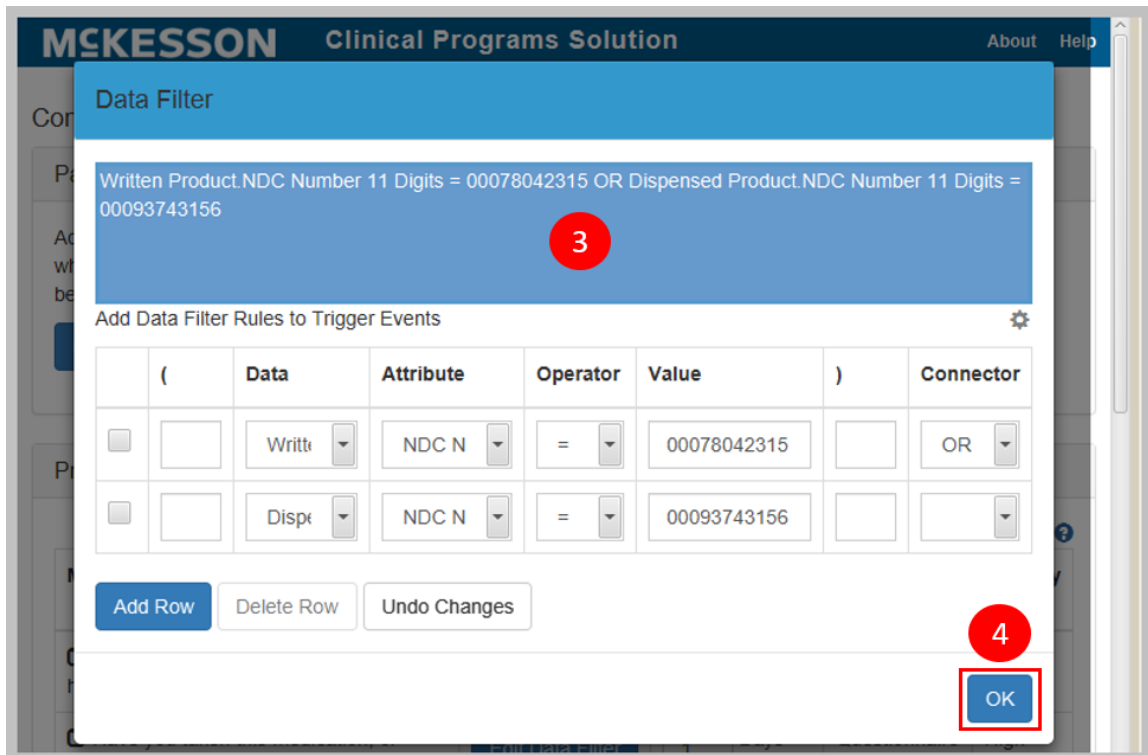
The following are some examples of more complex filter setups:

Complex Filter Example #1:

Now we will set up a more complex filter. If, for example, you want to create a program which will trigger an enrollment when the dispensed product is the generic equivalent of the written product. After you complete steps 1-7 above, do the following:



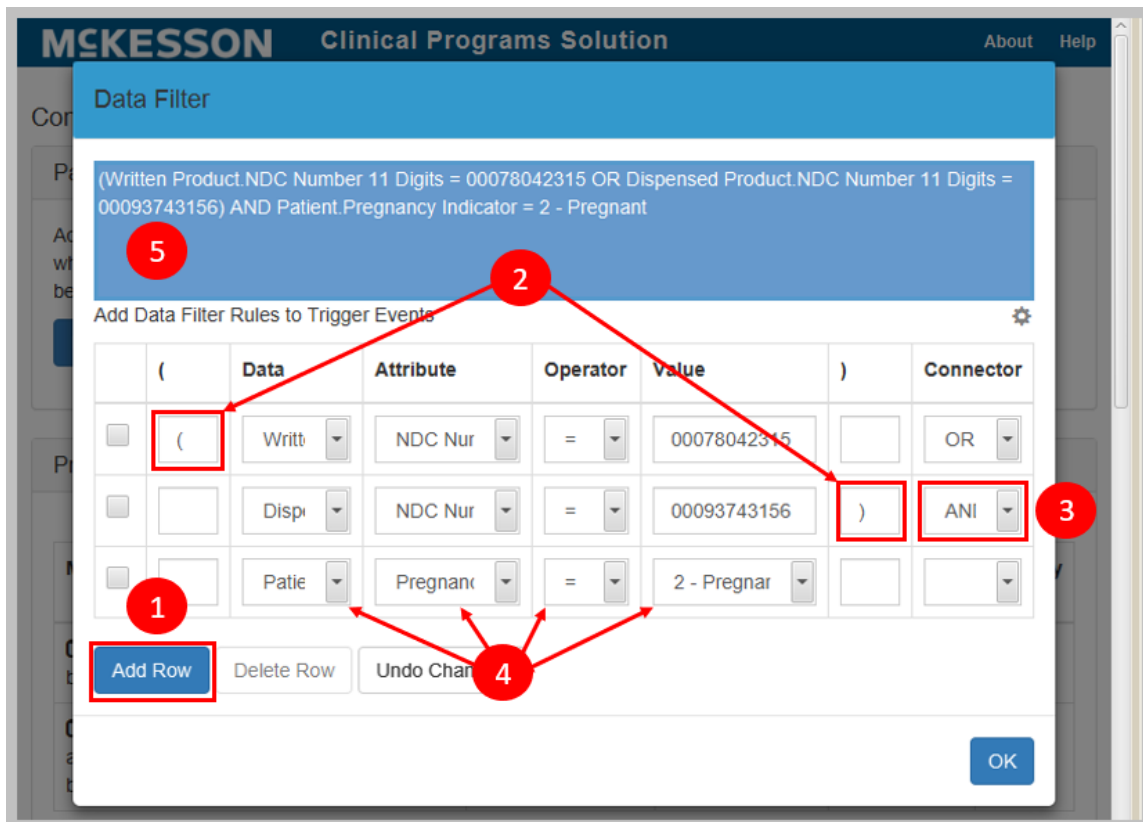
- 1) Select the drop down arrow in the **Connector** field and scroll to **OR**.
- 2) Select the **Add Row** button and repeat steps two through 6 of the "Simple Filter Example" instructions above.



- 3) Check the blue text box above your data filter and ensure that your filter has been configured correctly.
- 4) Select **OK** to add the filter.

Complex Filter Example #2:

The following is an example of a program filter setup with even more complexity. For this example we are setting up a filter which will trigger enrollment for a patient when either one of two product NDCs are filled **AND** the patient is pregnant. This is a situation in which you will have to insert parenthesis in the appropriate fields. Subsequent to following the instructions above on "Complex Filter Example #1," complete the following steps:



McKesson Clinical Programs Solution Data Filter

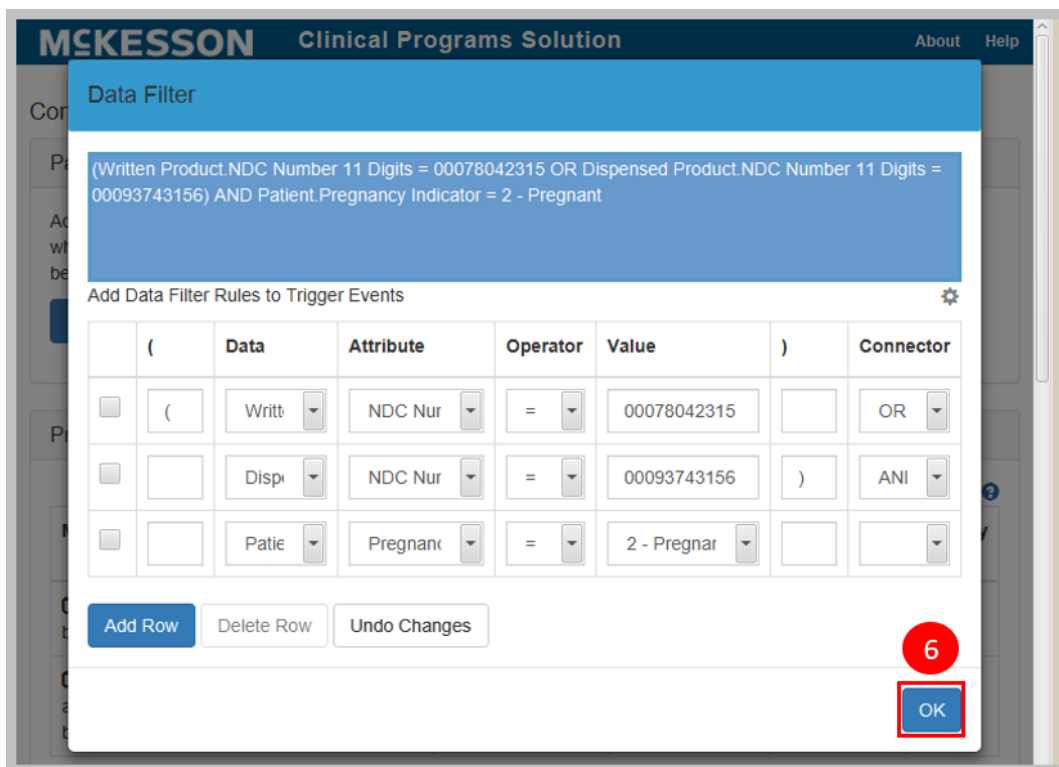
(Written Product.NDC Number 11 Digits = 00078042315 OR Dispensed Product.NDC Number 11 Digits = 00093743156) AND Patient.Pregnancy Indicator = 2 - Pregnant

Add Data Filter Rules to Trigger Events

	(	Data	Attribute	Operator	Value	)	Connector
<input type="checkbox"/>	(Writt	NDC Nur	=	00078042315		OR
<input type="checkbox"/>		Dispi	NDC Nur	=	00093743156	)	ANI
<input type="checkbox"/>		Patie	Pregnanc	=	2 - Pregnar		

Buttons: Add Row, Delete Row, Undo Char, OK

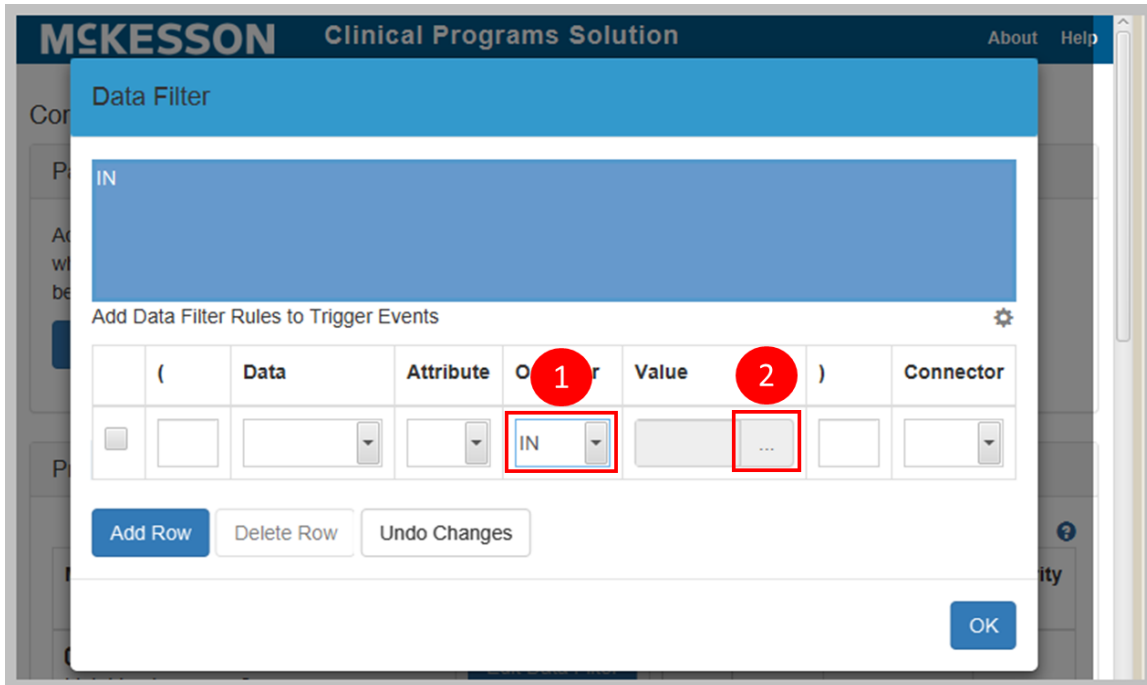
- 1) Select the **Add Row** button.
- 2) Insert the open and closed parenthesis as shown in the image above.
- 3) Select the drop down for **Connector** and choose **AND**.
- 4) Insert the row fields as appropriate. For this example, we've used: **Patient** in the **Data** field, **Pregnancy Indicator** in the **Attribute** field, = in the **Operator** field, and **2 – Pregnant** in the **Value** field.
- 5) Check the blue text box above your data filter and ensure that your filter has been configured correctly.



6) Select the **OK** button to save your filter.

Adding an Array of Values with the IN and NOTIN Operators

When using the IN and NOTIN operators in a data filter, you can add an array of values by individually adding each value, or you can add multiple values at a time by importing a comma-separated values (CSV) file.

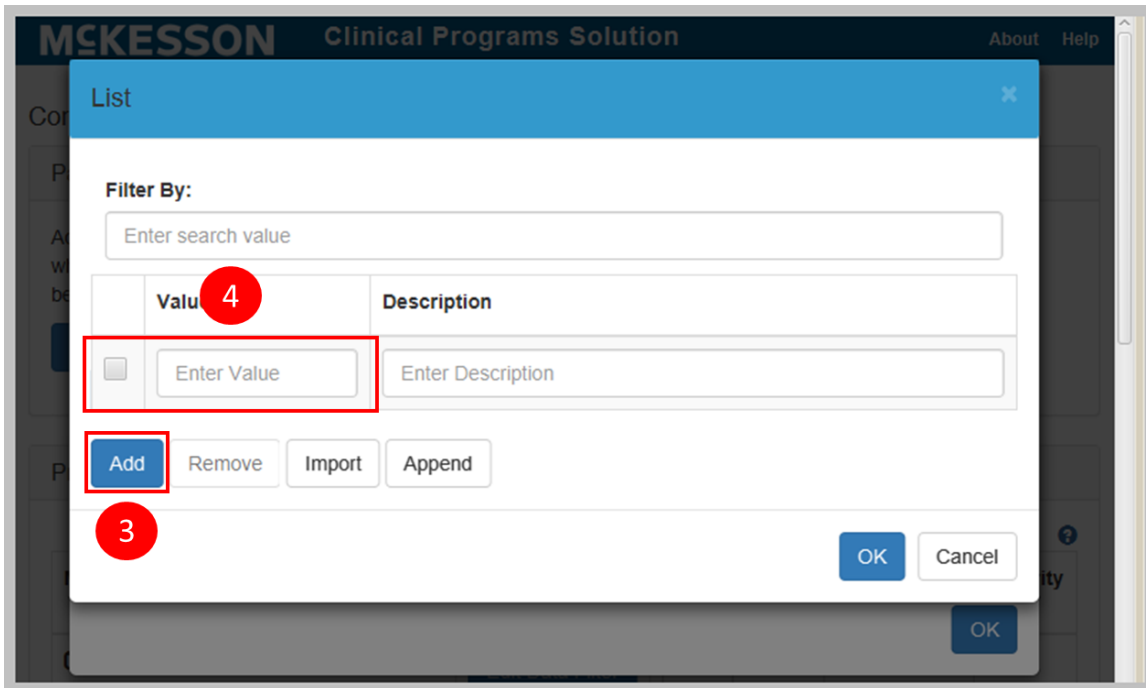


1) On the Data Filter screen, select IN or NOTIN from the **Operator** drop down.

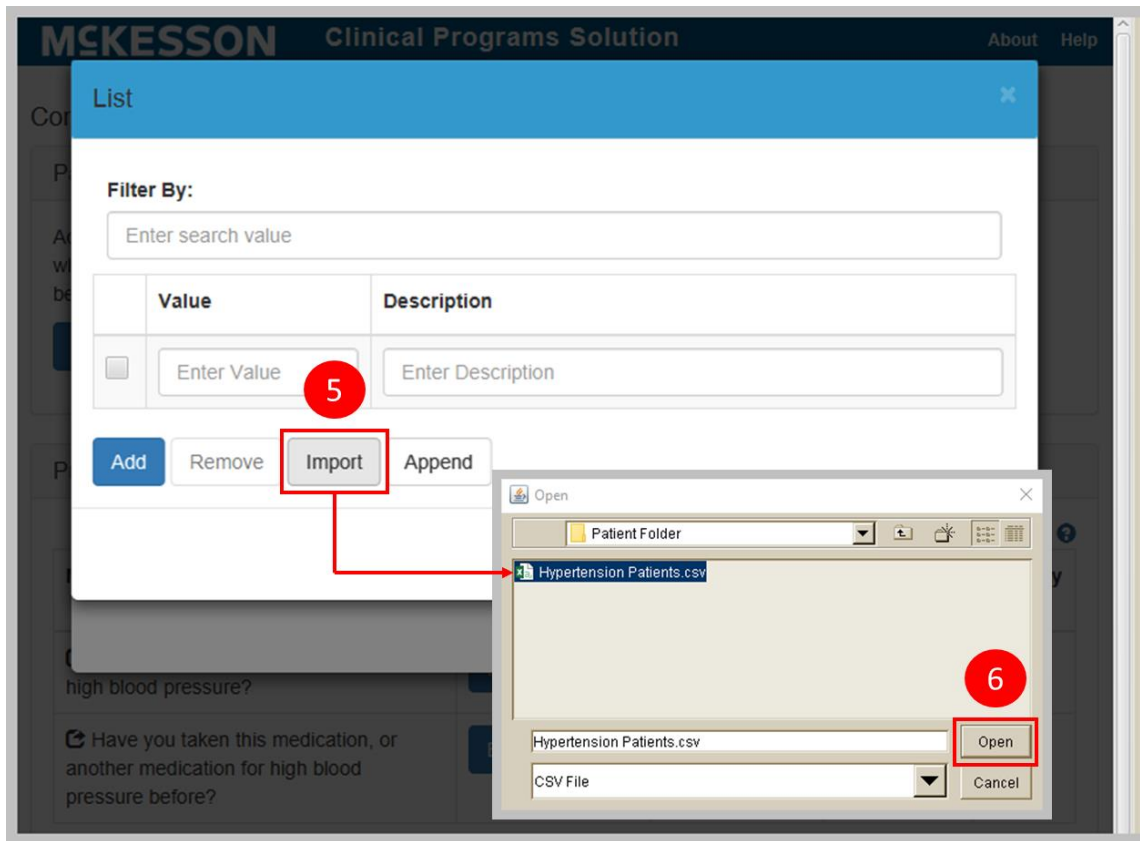
Note: The **IN** and **NOTIN** operators are not supported for the following attributes:

- For the **Patient** data element: **Enrolled Programs, Non Enrolled Programs, Codes, Additional Data, Patient Groups, Allergy Codes, and Age**
- For the **Written Product** and **Dispensed Product** data elements: **Product Groups**

2) In the **Value** field, select the ellipsis (...) to open the **List** dialog screen.



- 3) Select the **Add** button to add new individual values to the list.
- 4) Enter the **Value** and **Description** for each item in the list. The **Description** field is optional.

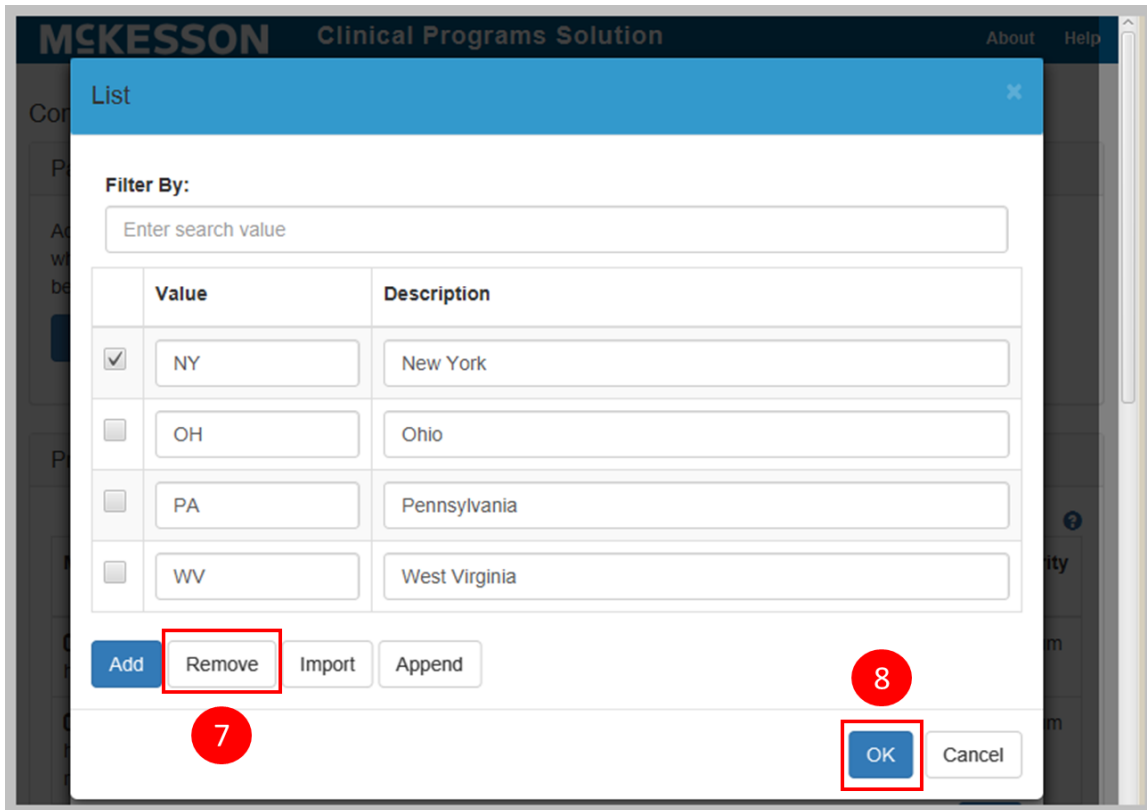


- 5) To upload multiple values at once using a CSV file, select the **Import** button.
Note: Using the **Import** button to import a CSV file will override any existing items in the list. Alternatively, you can use the **Append** button to import a CSV file. Using the **Append** button does not overwrite any existing list items and will add the new values at the end of the list.

Note: The format of the CSV file is a value and description on each line, separated by a comma. The header format of the CSV file needs to match the field names on the **List** dialog. For example:

```
Value,Description
NY,New York
OH,Ohio
PA,Pennsylvania
WV,West Virginia
```

- 6) Select the CSV file and select the **Open** button to add the items from the file to the list.



- 7) To remove an individual item, select the check box next to the item and select the **Remove** button.
- 8) When you are done making changes, select the **OK** button to return to the Data Filter screen.

Note: Data filters are specific to the Pharmacy Management System (PMS), and to the version of software that the PMS is running. Consult the list of [data filters](#) in the appendix for a list of available Data Filters.

Setting the Time Period to Re-ask Patients to Enroll

If an enrollment message is triggered and the pharmacist asks the patient if they would like to enroll in a program, but they decline, they may want to ask the patient again sometime in the future. Users can select a numeric value (1 through 12 months) from the **Time Period Before Asking a Patient to Enroll Again** dropdown to define when they should follow-up with the patient about enrolling in the program. Users can select **999** in the dropdown if they do not want to ask the patient about enrollment in this program again.

Note: You will only see this field in the **Patient Enrollment** section for programs with an **Enrollment Type** of **Patient Enrollment** (not for those with an **Enrollment Type** of **No Enrollment**).



McKESSON Clinical Programs Solution About Help

Configure Hypertension Adherence

Patient Enrollment

Add a Data Filter Rule to configure when an Enrollment Message will be shown

Edit Data Filter

Time Period Before Asking a Patient to Enroll Again

3 Months

Due Date Reminder

Days

Setting the Due Date Reminder for Enrollment Messages

The **Due Date Reminder** field (measured in days) allows you to define when a message will become visible in the Clinical App and Task Queue. For example, if you set this field to **4**, the message will appear in the Clinical App and Task Queue four days before the scheduled due date. If the **Due Date Reminder** field is set to zero (0), then any associated messages will appear in the Clinical App and Task Queue when the due date is reached. If the **Due Date Reminder** field is set to blank, any associated messages will always appear in the Clinical App and Task Queue.

The Due Date Reminder field can be set on **Patient Enrollment** messages and **Program Messages**.

Note: You will only see this field in the **Patient Enrollment** section for programs with an **Enrollment Type** of **Patient Enrollment** (not for those with an **Enrollment Type** of **No Enrollment**).



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About Help

Configure Hypertension Adherence

Patient Enrollment

Add a Data Filter Rule to configure when an Enrollment Message will be shown

[Edit Data Filter](#)

Time Period Before Asking a Patient to Enroll Again

▼

Months

Due Date Reminder

Days

Program Messages

Message	Data Filter	Due Date Reminder	Type	Severity
🔄 Are you currently on a medication for high blood pressure?	Edit Data Filter	<input style="width: 40px; height: 20px; border: 1px solid #ccc;" type="text"/> Days	Questionnaire	High
🔄 Have you taken this medication, or another medication for high blood pressure before?	Edit Data Filter	<input style="width: 40px; height: 20px; border: 1px solid #ccc;" type="text"/> Days	Questionnaire	High

Setting Data Filters for Program Messages

Next, you will need to configure the data filters for what criteria needs to be met in order to display the program messages set up in CPS Program Builder. The system should display any messages that have been set up in CPS Program Builder in the Program Messages section.

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McKESSEN Clinical Programs Solution About Help

Configure Hypertension Adherence

Patient Enrollment

Add a Data Filter Rule to configure when an Enrollment Message will be shown

Time Period Before Asking a Patient to Enroll Again: 3 Months

Due Date Reminder: Days

[Edit Data Filter](#)

Program Messages

Message	Data Filter	Due Date Reminder	Type	Severity
<input type="checkbox"/> Are you currently on a medication for high blood pressure?	Edit Data Filter	<input type="text"/> Days	Questionnaire	High
<input type="checkbox"/> Have you taken this medication, or another medication for high blood pressure before?	Edit Data Filter	<input type="text"/> Days	Questionnaire	High

- 1) To get started, select the **Edit Data Filter** button next to the first message for which you want to edit the data filter.

McKESSEN Clinical Programs Solution About Help

Data Filter

Add Data Filter Rules to Trigger Events

(	Data	Attribute	Operator	Value	)	Connector
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	=	<input type="text"/>	<input type="text"/>	<input type="text"/>

[Add Row](#) [Delete Row](#) [Undo Changes](#)

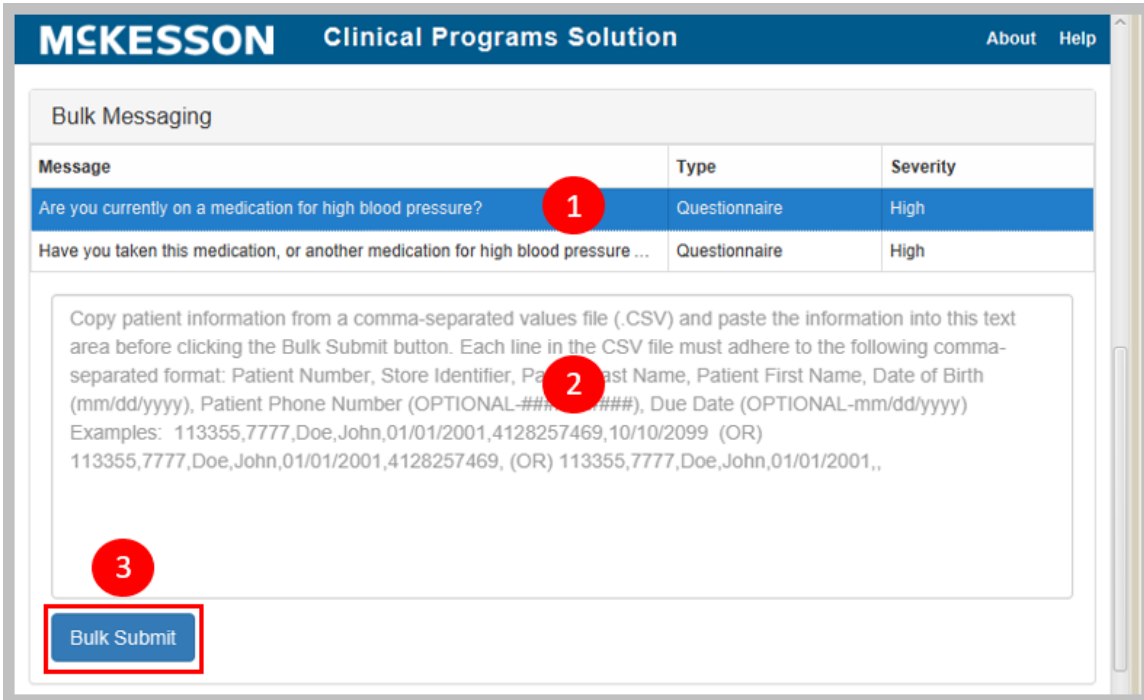
[OK](#)

- 2) Select the **Add Row** button to add a row to the data filter. The data filters in this area work exactly like those that we set up for the enrollment message. Follow the steps in either the "Simple" or "Complex" data filter examples above to configure the data filter of each program message.

Note: You will need to edit data filters separately for each message that you set up in CPS Program Builder.

Bulk Messaging Patients Outside of Prescription Processing

The Bulk Messaging feature allows you to generate program messages for a specified list of patients without requiring prescription processing. Only Standard or Questionnaire program messages configured for a given Self-Directed program are available for use with Bulk Messaging.



McKesson Clinical Programs Solution About Help

Bulk Messaging

Message	Type	Severity
Are you currently on a medication for high blood pressure?	Questionnaire	High
Have you taken this medication, or another medication for high blood pressure ...	Questionnaire	High

Copy patient information from a comma-separated values file (.CSV) and paste the information into this text area before clicking the Bulk Submit button. Each line in the CSV file must adhere to the following comma-separated format: Patient Number, Store Identifier, Patient Last Name, Patient First Name, Date of Birth (mm/dd/yyyy), Patient Phone Number (OPTIONAL-###-####), Due Date (OPTIONAL-mm/dd/yyyy)
 Examples: 113355,7777,Doe,John,01/01/2001,4128257469,10/10/2099 (OR)
 113355,7777,Doe,John,01/01/2001,, (OR) 113355,7777,Doe,John,01/01/2001,,

Bulk Submit

- 1) Select the desired program message from the message list.
- 2) Enter the desired patient information from a comma separated list (CSV) file in the Bulk Messaging field. McKesson recommends that you display the CSV file in a text-editing application such as Notepad, copy it, and then paste it directly into this field.

Each line in the list must adhere to the following comma separated format: **Patient Number, Store Identifier, Patient Last Name, Patient First Name, Date of Birth, Patient Phone Number** (optional), **Due Date** (optional). Each row must contain six commas.

Note the following specifics about these attributes:

- **Patient Number:** Required. Numeric characters only. Maximum length is 18 characters.
- **Store Identifier:** Required. Maximum length is 50 characters.
- **Patient Last Name:** Required. Maximum length is 50 characters.
- **Patient First Name:** Required. Maximum length is 50 characters.
- **Date of Birth:** (in mm/dd/yyyy format) - Required. Maximum length is ten characters.
- **Patient Phone Number** (in ##### format): Optional. Numeric characters only. Maximum length is ten characters. Phone Number area codes cannot start with the numeral “1”.
- **Due Date** (in mm/dd/yyyy format): Optional. Maximum length is ten characters. When a date is provided in the **Due Date** field, the due date for each bulk message will be set to the specified date. When the **Due Date** field is left blank, there will be no due date set on each bulk message. Any message that is generated via Bulk Messaging will have an **Unread** Message Status.

Bulk Messaging accepts the following characters in the **Patient First Name** and **Patient Last Name** fields:

- Apostrophe (')
- Hyphen (-)
- Blank space ()
- Alphabetic (uppercase and lowercase)
- Numeric characters (0 - 9)
- Underscore (_)
- Period (.)

- 3) Select **Bulk Submit**. If there are any issues with the submission (for example, an error in formatting or when the selected program is not enabled in a store specified in the input list), a warning dialog will display. You can make the suggested correction and retry. A success dialog will appear if there were no issues with the submission.

Bulk Enrolling Patients into Your Self-Directed Program

Users can bulk enroll patients from CPS Program Admin by entering the patient information from a comma separated list (CSV file) in the **Bulk Enrollment** field.



Bulk Enrollment

Copy patient information from a comma-separated values file (.CSV) and paste the information into this text area before clicking the Bulk Enroll button. Each line in the CSV file must adhere to the following comma-separated format: Patient Number, Store Identifier, Patient Last Name, Patient First Name, Date of Birth (mm/dd/yyyy), Patient Phone Number (OPTIONAL-#####), Generate On Enrollment Due Date (OPTIONAL-mm/dd/yyyy)
 Examples: 113355,7777,Doe,John,01/01/2001,4128257469,01/10/2099 (OR)
 113355,7777,Doe,John,01/01/2001,4128257469, (OR) 113355,7777,Doe,John,01/01/2001,,

Bulk Enroll

- 1) Enter the desired patient information from a CSV file in the **Bulk Enrollment** field. McKesson recommends that you display the CSV file in a text-editing application such as Notepad, copy it, and then paste it directly into this field.

The required information in this field depends on whether or not you are completing bulk enrollment for a program configured to generate a message(s) on enrollment.

If you are completing a bulk enrollment for a program that is not configured to generate a message(s) on enrollment, each line in the list must follow this comma separated format: **Patient Number, Store Identifier.**

If you are completing a bulk enrollment for a program configured to generate a message(s) on enrollment, each line in the list must follow this comma separated format: **Patient Number, Store Identifier, Patient Last Name, Patient First Name, Date of Birth, Phone Number, Generate On Enrollment Due Date.** Each row must contain six commas.

Note the following **specifics about these attributes:**

- **Patient Last Name:** Required. Maximum length is 50 characters.
- **Patient First Name:** Required. Maximum length is 50 characters.
- **Date of Birth** (in mm/dd/yyyy format) - Required. Maximum length is ten characters.
- **Phone Number** (in ##### format): Optional. Numeric characters only. Maximum length is ten characters. Phone Number area codes cannot start with the numeral "1".
- **Generate On Enrollment Due Date** (in mm/dd/yyyy format): Optional. Maximum length is ten characters. When a date is provided in the **Generate On Enrollment Due Date** field, the due date for each Generate On

Enrollment message configured for that program will be set to the specified date. When the **Generate On Enrollment Due Date** field is left blank, there will be no due date set on each Generate On Enrollment message configured for that program. Any message that is configured to generate on enrollment will have an **Unread Message Status**.

- **Patient Number:** Required. Numeric characters only. Maximum length is 18 characters.
- **Store Identifier:** Required. Maximum length is 50 characters.

Bulk Enrollment accepts the following characters in the **Patient First Name** and **Patient Last Name** fields:

- Apostrophe (')
- Hyphen (-)
- Blank space ()
- Alphabetic (uppercase and lowercase)
- Numeric characters (0 - 9)
- Underscore (_)
- Period (.)

- 2) Select **Bulk Enroll**. If there are any issues with the submission (for example, an error in formatting), a warning dialog will display. You can make the suggested correction and retry the bulk enrollment. A success dialog will appear if there were no issues with the submission.

Note: The image in the above section demonstrates what the configuration screen will look like when the program is configured to generate a message(s) on enrollment. In the Program Messages section, a **Generate On Enrollment** icon will be displayed next to any messages that are configured to generate on enrollment. If the program is not configured to generate a message(s) on enrollment, different help text will display in the **Bulk Enrollment** field.



MCKESSON Clinical Programs Solution About Help

Configure Hypertension Monitoring / Counseling

Patient Enrollment

Add a Data Filter Rule to configure when an Enrollment Message will be shown

Time Period Before Asking a Patient to Enroll Again

 Months

Due Date Reminder

 Days

[Edit Data Filter](#)

Program Messages

Message	Data Filter	Due Date Reminder	Type	Severity
Are you currently on a medication for high bloodpressure?	Edit Data Filter	<input type="text"/> Days	Questionnaire	High
Have you taken this medication, or another medication for high blood pressure before?	Edit Data Filter	<input type="text"/> Days	Questionnaire	High

Saving Program Configuration

Once you've finished configuring all of the enrollment and program message filters, select the **Save** button.

Now you're ready to enable the self-directed program. Go to the chapter ["Enabling Clinical Programs"](#) to finish the program.

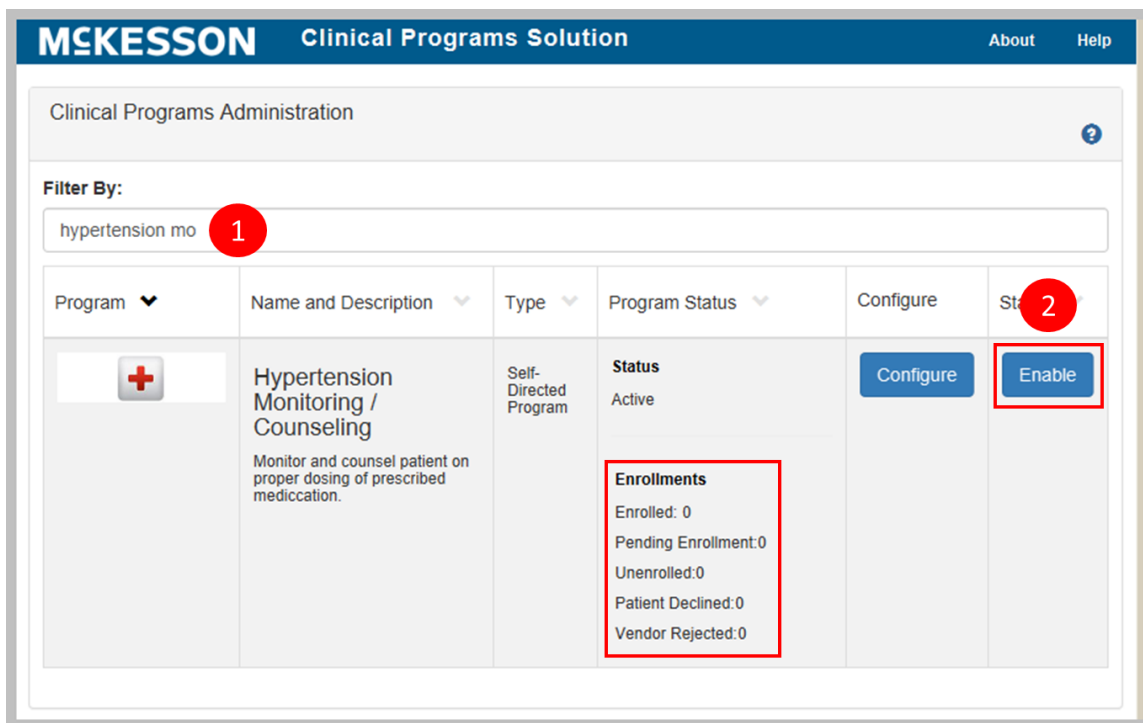
McKesson Clinical Programs Solution™ Release 1.10.11 User Guide

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Enabling Clinical Programs

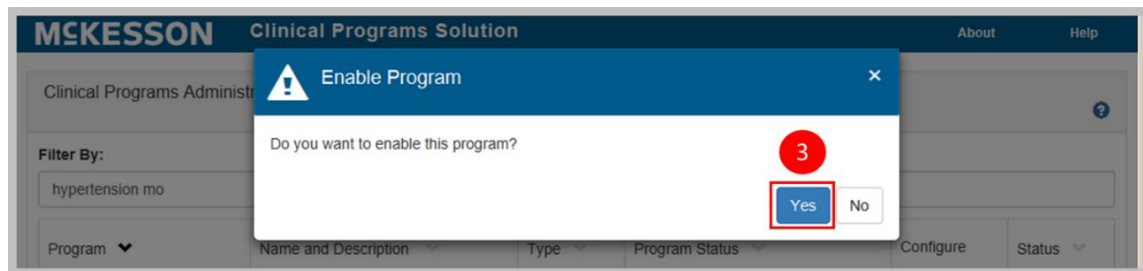
Enabling a self-directed program

After you have configured your self-directed program the last step is to enable it. This is where the program needs to be enabled so that it can be utilized by users. Until the program is enabled, messages and enrollments will not be seen by users.



To Enable a Program:

- 1) Type the program name into the **Filter By** text box.
- 2) Once the program displays in the list, select the **Enable** button.



3) Select **Yes** to enable the program



The CPS Program Admin screen is also a place where you can get a snapshot of how many patients are enrolled, are pending enrollment, have unenrolled, have declined, or (for vendor programs) the vendor has rejected. See the area in the red box in the image above for this information.

Now the program is ready to display messages. Messages will appear in the [Clinical App and Task Queue](#) when the filter criteria have been met.

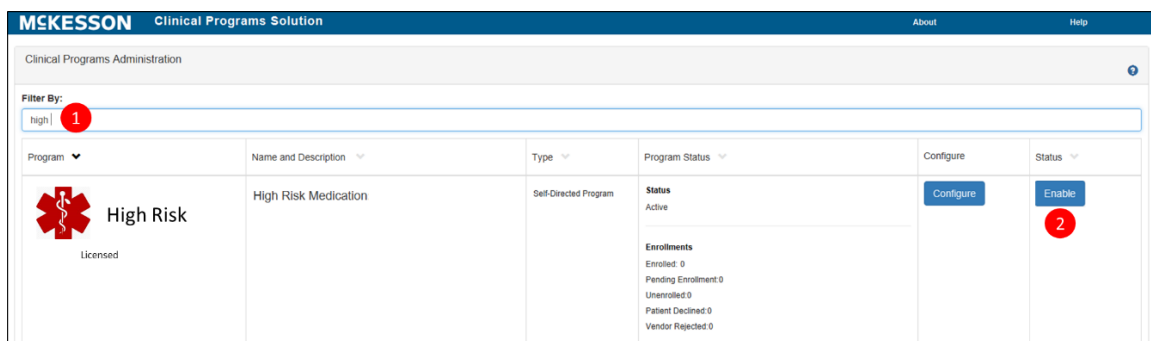
Enabling a preconfigured program

CPS preconfigured programs are turn key programs that provide pharmacies revenue generating clinical opportunities, additional front-end sales of highly profitable over-the-counter (OTC) products and repeat business.

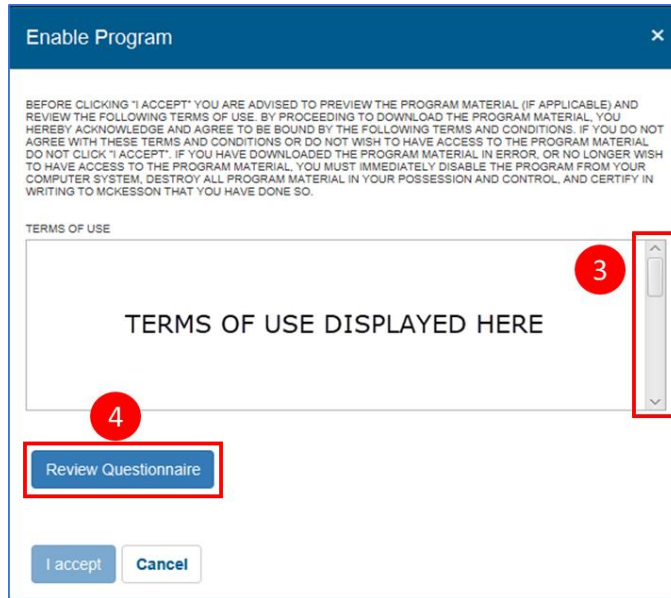
Note: Preconfigured programs are only available with the CPS Premium Subscription. Please contact your Account Manager/Account Executive for more information.

When enabling a preconfigured program at either the corporate root or facility level, you will be required to acknowledge and agree to the program's Terms of Use and questionnaire, if applicable.

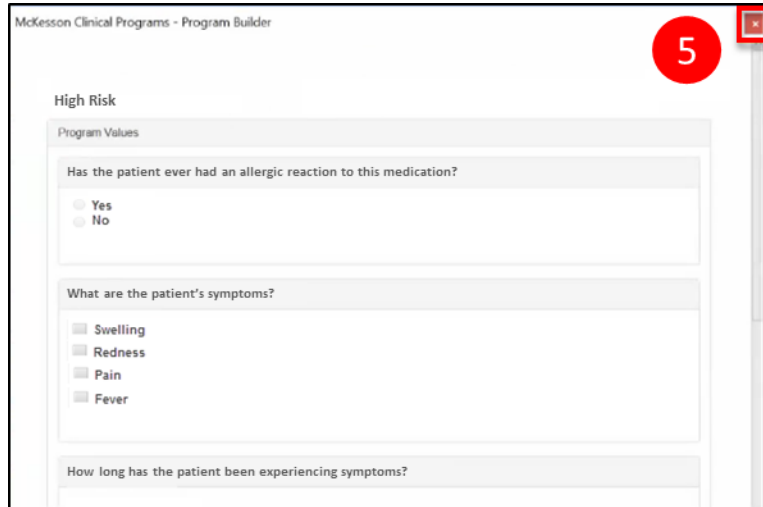
To Enable a preconfigured program:



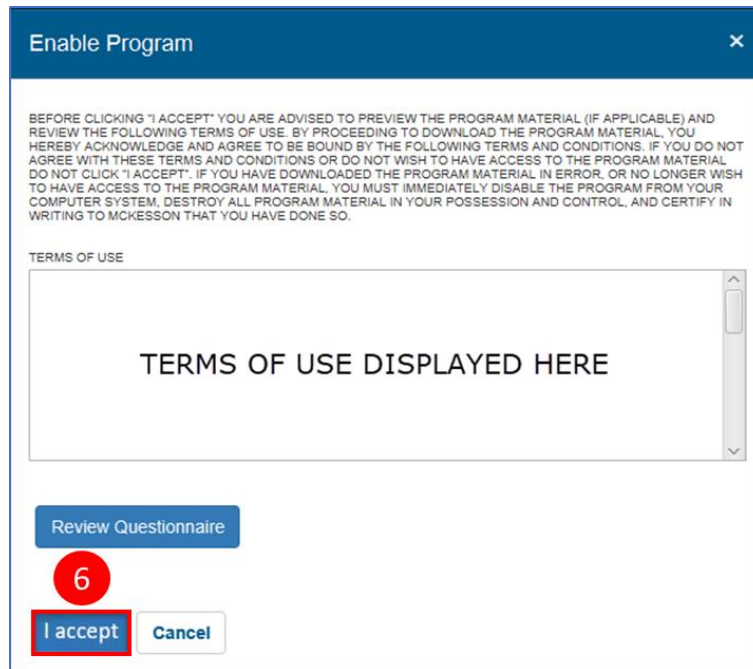
- 1) Type the program name into the Filter by text box.
- 2) Once the program displays in the list, click the Enable button.



- 3) The **Enable Program** dialog will display with the Terms of Use. Use the vertical scrollbar to review the instructions and entire Terms of Use.
- 4) Select the **Review Questionnaire** button. The questionnaire will open for your review.

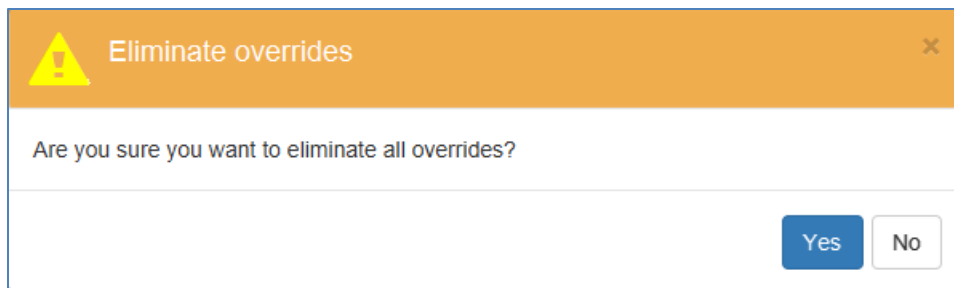


- 5) Review the questionnaire. When finished reviewing, select the “X” in the upper right corner of the screen.



- 6) To acknowledge and agree to the program’s Terms of Use and questionnaire, select the **I accept** button to enable the program. If you do not want to proceed with enabling the program, select the **Cancel** button.

Note: The **Review Questionnaire** button will only display if the program has an associated questionnaire. Steps 4) and 5) will not be applicable when the program does not have an associated questionnaire.



When enabling a preconfigured program at the corporate root level, you will be prompted with the **Eliminate overrides** dialog after selecting the **I accept** button in the **Enable Program** dialog.

Now the program is ready to display messages. Messages will appear in the [Clinical App and Task Queue](#) when the filter criteria have been met.

Receiving Messages in the Clinical App

Once a program has been built, activated, configured and enabled, CPS messages will display when the criteria set in CPS Program Admin have been met. This chapter will outline how program messages will display during workflow, and the actions that can be taken on these messages.

For this example, we are using a program which was set up to send enrollment messages upon the filling of a certain NDC number, and other messages once the patient has been enrolled and subsequently refills the same NDC. In this scenario, after we fill an Rx with the matching NDC number from our filter and move it forward in workflow, our enrollment message will be triggered. In EnterpriseRx, the first indication of this enrollment message is in the Clinical App header. For Pharmaserv, the Clinical App window must be open to view any messages.

Note: During downtime or a network outage, the Clinical App will display a communication error upon any user action, such as searching for a patient. This error message will disappear following the next user action that does not result in a communication error.

Clinical App Actions

- [Viewing Programs and Messages](#)
- [Enrolling Patients](#)
- [Viewing Current and Resolved Questionnaires](#)
- [Refusing Enrollment](#)
- [Entering Follow-up Messages](#)
- [Changing the Expiration Date or Message Severity](#)
- [Resolving Messages](#)
- [Printing Program Messages](#)



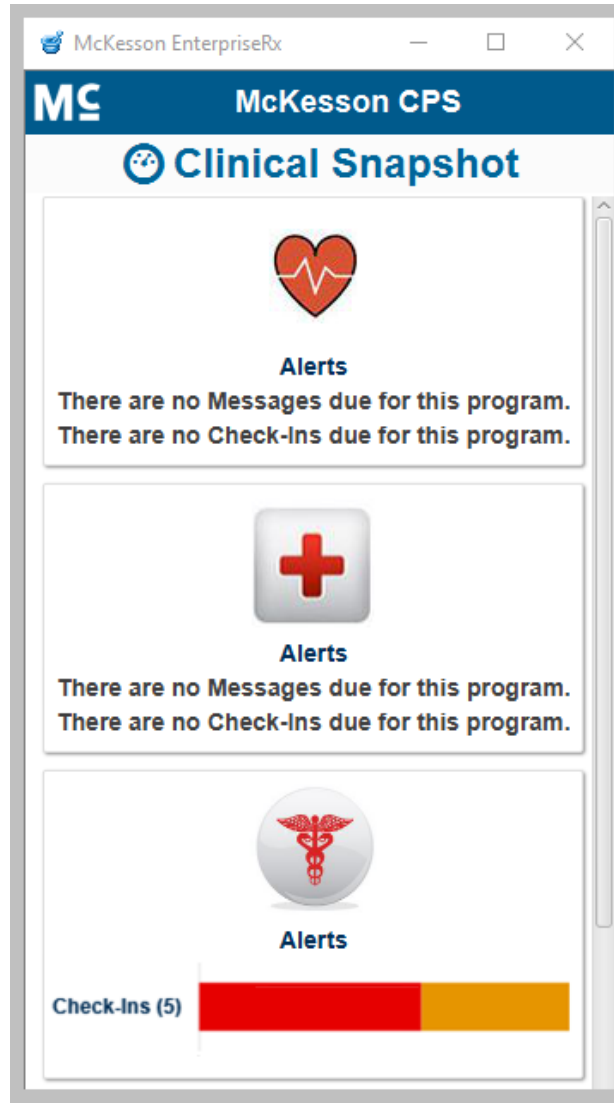
Viewing Programs and Messages

Viewing Enabled Programs in Clinical Snapshot

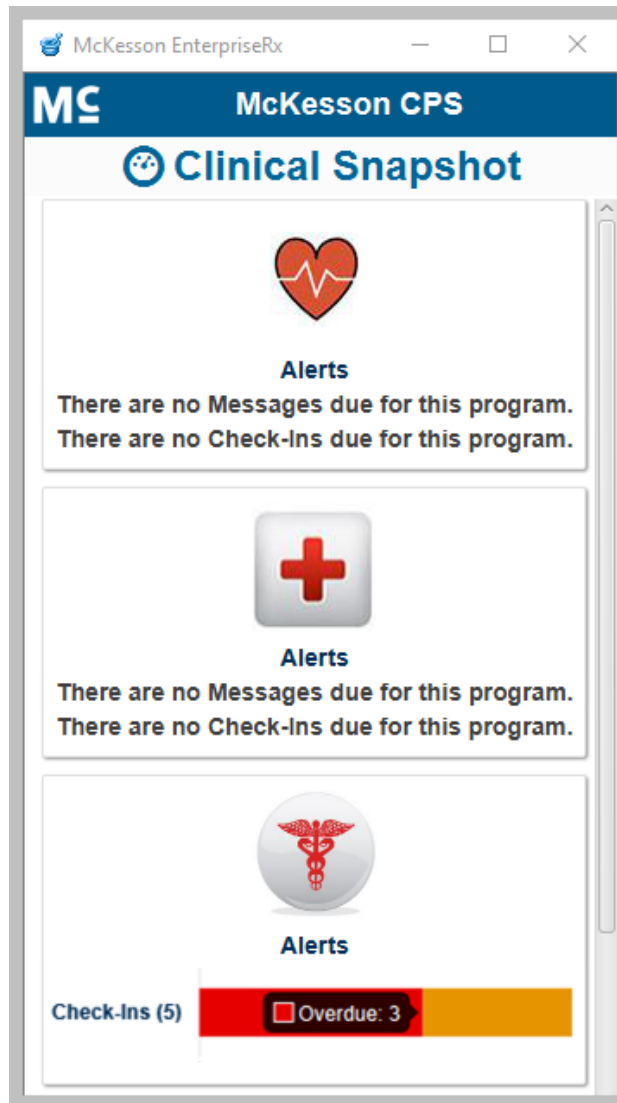


When a patient is not in context in the Pharmacy Management System, the Clinical Snapshot will display within the Clinical App. The Clinical Snapshot provides you with a way to quickly check the status of your programs at a high level. When a Vendor or Self-Directed program is enabled in the logged in store, the program will display within the Clinical Snapshot, along with the corresponding message count. Programs will be sorted in alphabetical order within the Clinical Snapshot.

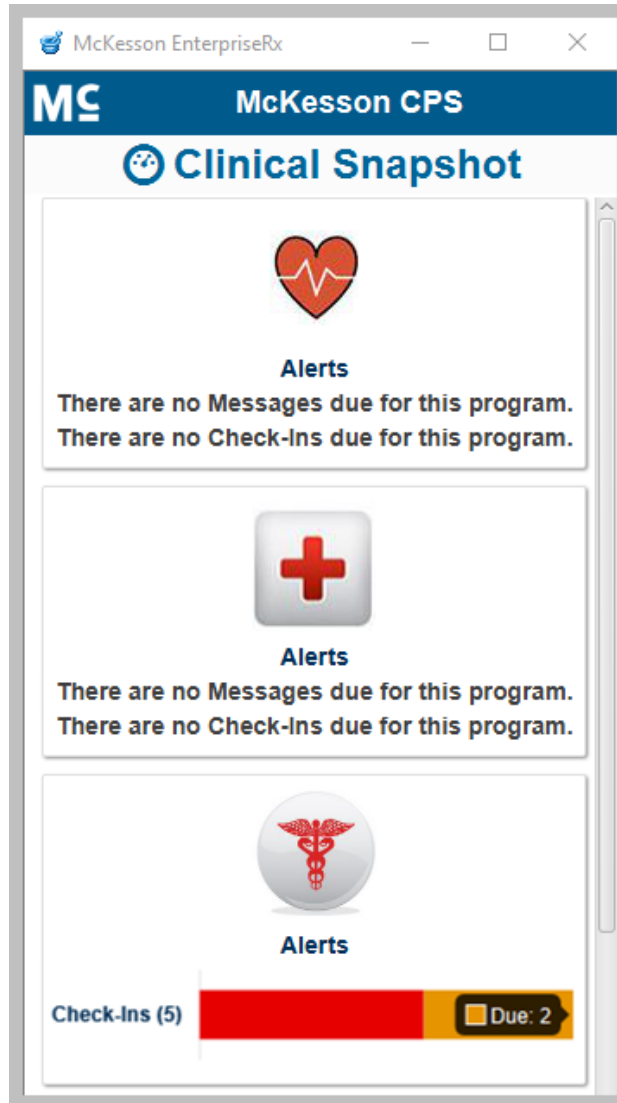
Note: If no programs are enabled in the logged in store, the Clinical Snapshot will display the following message: “There are no programs enabled in this facility.”



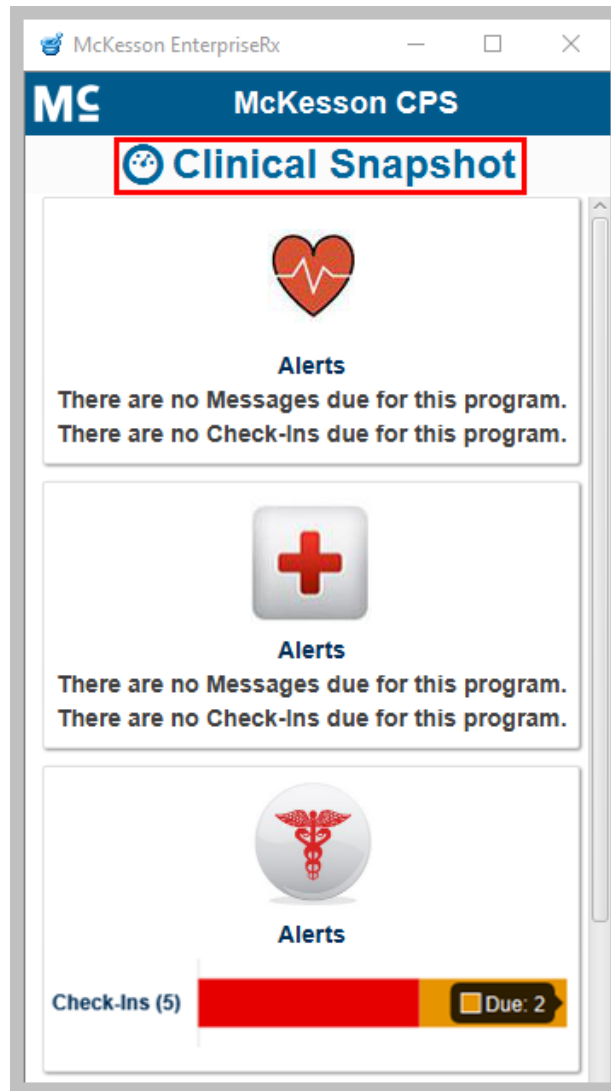
To provide insight into a program's overall status, messages with a due date in the past will display as red within the accompanying graph and, when you hover over the red section, the total count of past due messages will display.



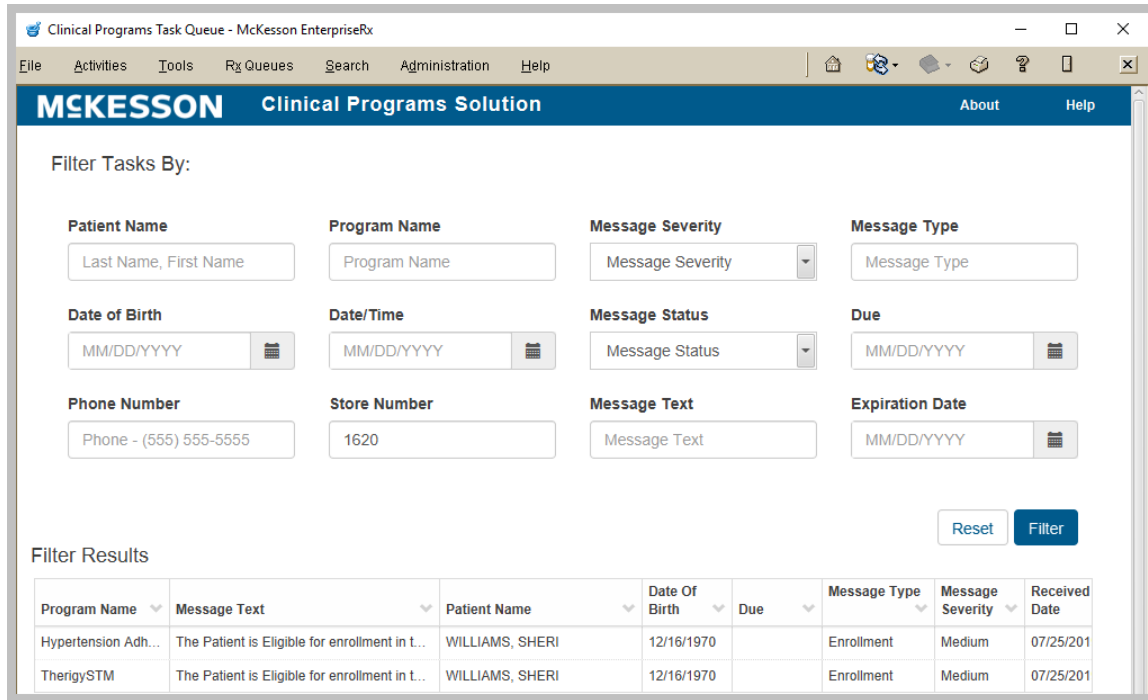
Similarly, messages without a due date or due within the configured Due Date Reminder range will display as orange within the accompanying graph and, when you hover over the orange section, the total count of messages without a due date or due within the configured Due Date Reminder range will display.



Note: To refresh the Overdue and Due message counts, select the Clinical Snapshot title bar.



When you select a program's message count or accompanying graph within the Clinical Snapshot, the Task Queue will open in a new window and the Task Queue will be filtered for the selected program and logged in store. This will allow you to view patient Rx history while completing messages and questionnaires.



Program Name	Message Text	Patient Name	Date Of Birth	Due	Message Type	Message Severity	Received Date
Hypertension Adh...	The Patient is Eligible for enrollment in L...	WILLIAMS, SHERI	12/16/1970		Enrollment	Medium	07/25/201
TherigySTM	The Patient is Eligible for enrollment in L...	WILLIAMS, SHERI	12/16/1970		Enrollment	Medium	07/25/201

Note: When the Task Queue is accessed via the Clinical Snapshot, the Overdue and Due message counts in the Clinical Snapshot will be automatically refreshed when action is taken on a message in the Task Queue.

If you are viewing the Clinical Snapshot when a patient is brought into context, the Clinical App will automatically put the patient into context to ensure that messages are not missed for the patient.

Viewing a Patient's CPS Alerts in the Clinical App Using EnterpriseRx

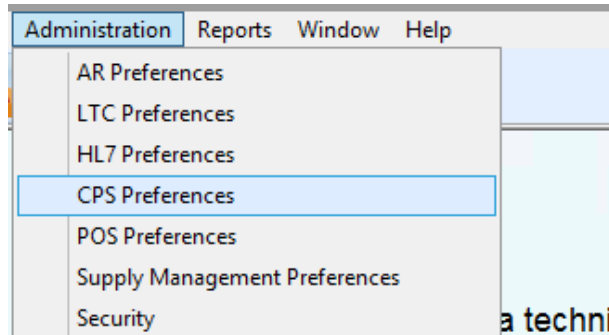
When the patient in context has CPS alerts available, the task bar area of EnterpriseRx containing the Clinical App header will change colors (shown below). In addition, for EnterpriseRx users on Version 9.0 or higher, the Clinical App will automatically expand from the docked view when the patient in context has a High Severity message available.



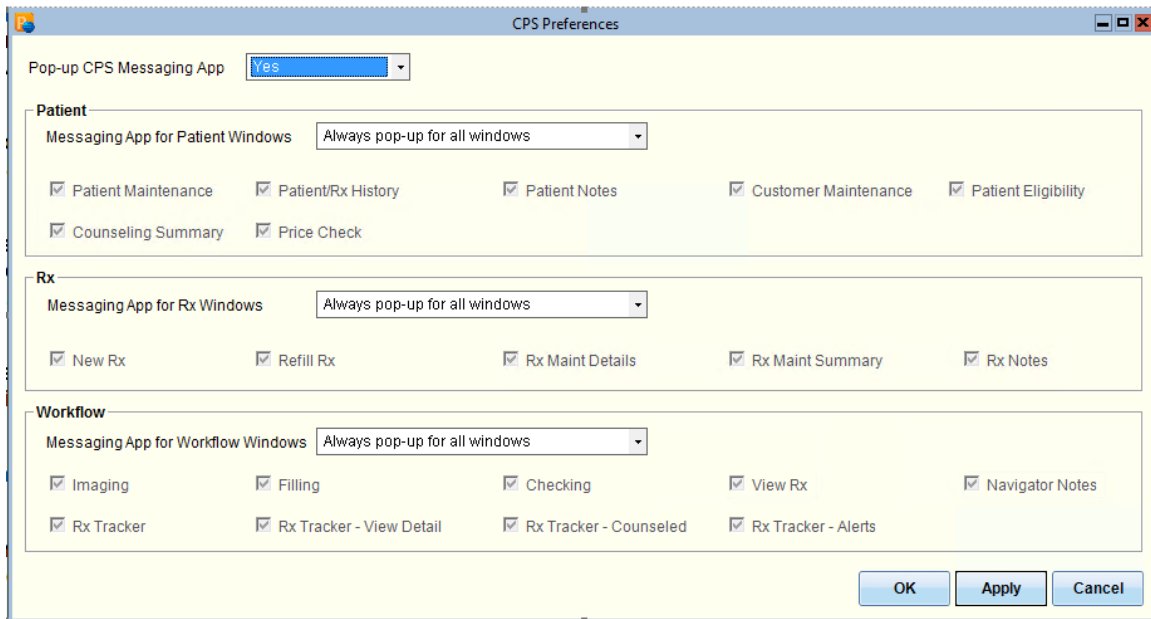
Select the orange Clinical App header to view the patient's available alerts. You can also select the arrow button to the right of the Clinical App header to dock/undock the Clinical App. The Clinical App displays in a separate pop-up window that you can move and resize for easier viewing.

Viewing a Patient's CPS Alerts in the Clinical App Using Pharmserv

If you are using Pharmserv, you can select the windows where CPS messages will be displayed. From the **Administration** menu, select **CPS Preferences**.



From the **CPS Preferences** window, you can enable or disable CPS pop-ups. In addition, you can select the windows that the pop-ups will be displayed in. When the patient in context is displayed in any of the selected windows, the pop-up messages will be displayed automatically.



Clinical App Alerts Tab

The Clinical App **Alerts** tab provides users the ability to quickly view and act upon CPS messages for the patient in context. The title bar for each message will display the program's name, aligned left, and the defined Due date, aligned right, if applicable. If a given program has a long name that does not fit in the message's

title bar, an ellipse (...) will display and users can hover over the title bar to view the full program name.

Messages will display within the **Alerts** tab of the Clinical App based on the following sort order:

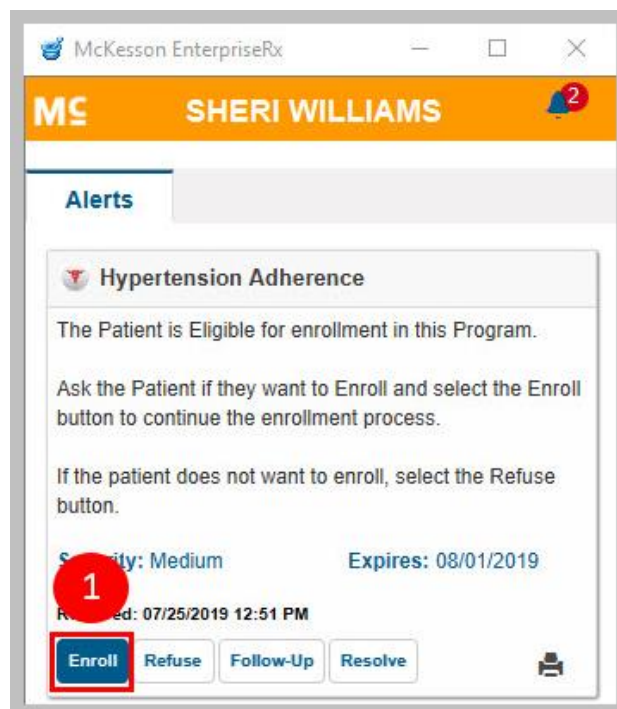
1. Due date
2. Message Severity (High, Medium, Low)
3. Received date

Users can take any of the following actions to process messages:

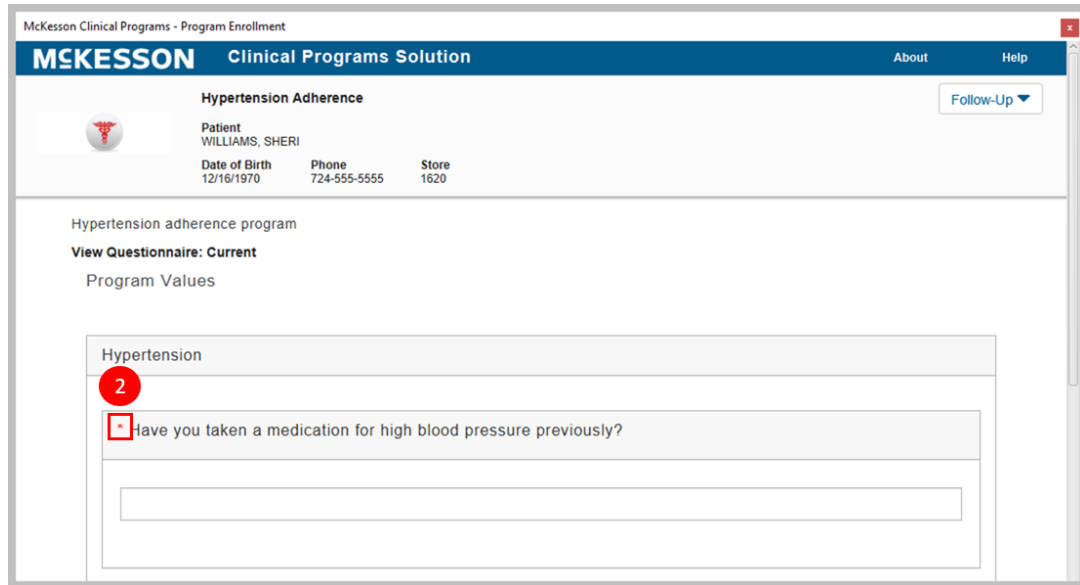
- Enroll a patient
- Enter a patient's refusal to enroll
- Enter a Follow-Up comment
- Change the message's due date
- Resolve the message
- Change the message's expiration date
- Change the message's severity
- Print the message

Enrolling Patients

In order to enroll your patient:




- 1) Select the **Enroll** button in the message. If a questionnaire is associated with the program, the questionnaire will open in a separate window, similar to the questionnaire below.



McKesson Clinical Programs - Program Enrollment

McKESSON Clinical Programs Solution About Help

Hypertension Adherence Follow-Up ▾

 Patient
WILLIAMS, SHERI

Date of Birth 12/16/1970 Phone 724-555-5555 Store 1620

Hypertension adherence program


View Questionnaire: Current

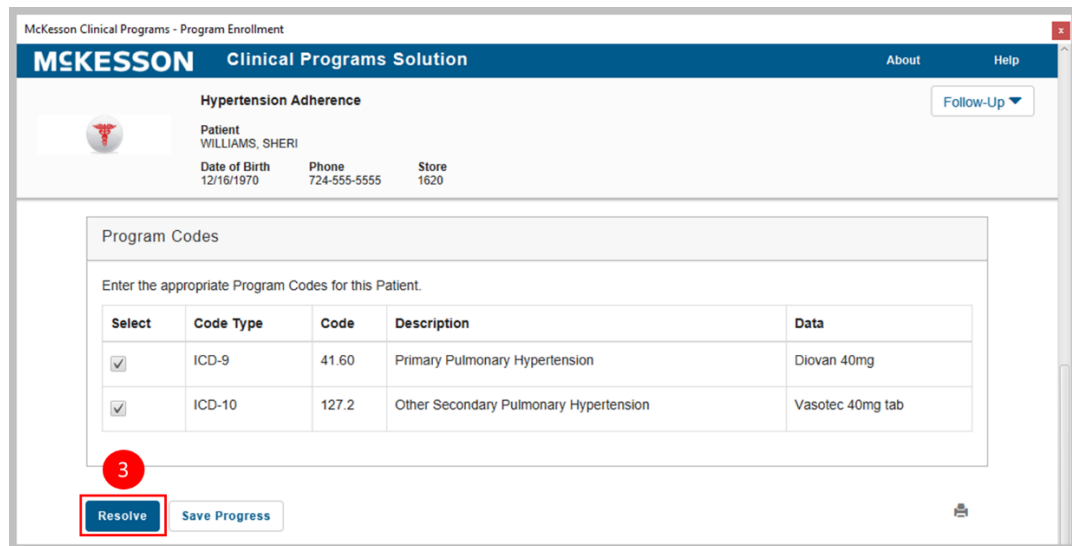
Program Values

Hypertension

2 Have you taken a medication for high blood pressure previously?

- 2) When the questionnaire displays, complete the required fields.


Note: A print icon () will also display within the questionnaire if printing is available in your system. Refer to the [Printing Questionnaires](#) section for more information.



McKesson Clinical Programs - Program Enrollment

McKESSON Clinical Programs Solution About Help

Hypertension Adherence Follow-Up ▾


 Patient
WILLIAMS, SHERI

Date of Birth 12/16/1970 Phone 724-555-5555 Store 1620

Program Codes

Enter the appropriate Program Codes for this Patient.

Select	Code Type	Code	Description	Data
<input checked="" type="checkbox"/>	ICD-9	41.60	Primary Pulmonary Hypertension	Diovan 40mg
<input checked="" type="checkbox"/>	ICD-10	127.2	Other Secondary Pulmonary Hypertension	Vasotec 40mg tab

3 **Resolve** Save Progress 

- 3) Select the **Resolve** button at the bottom of the window to submit your changes and resolve the message.

You can also use the **Save Progress** button if you want to save your changes but you are not ready to complete the questionnaire at this time. When you access the questionnaire again, you will see the changes you already entered.

Note: Enrolling a patient in a program will override any setting in place in the Pharmacy Management System where the user has set a "Do Not Contact" flag for the patient.

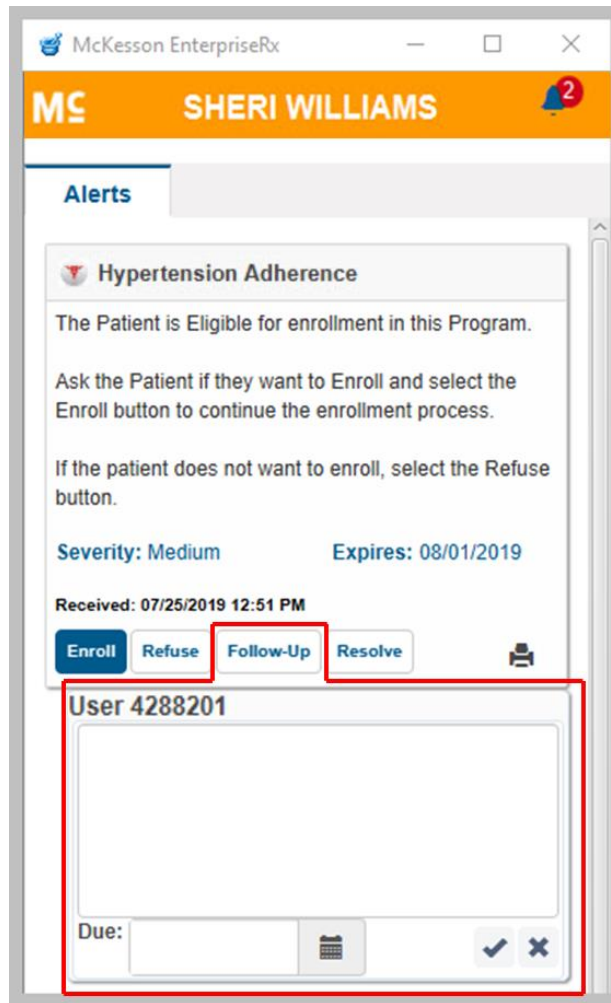
Refusing Enrollment

If the patient is asked about enrolling in the program and he/she refuses, select the **Refuse** button. The system will not send an enrollment message again for this patient for this particular program until the time period you set up in CPS Program Admin has been reached.

Entering Follow-up Comments

The **Follow-Up** button on a message within the Clinical App allows users to leave a comment to remind themselves, or someone else, to follow-up on messages. This may be useful in situations where the patient has not given a definitive answer about whether or not he/she is interested in enrolling in the program and it is necessary for your staff to follow-up with them again sometime in the future. It also allows users to change the due date for the message.

Selecting the **Follow-Up** button opens a text box where you can enter an optional comment and/or change the message's due date.

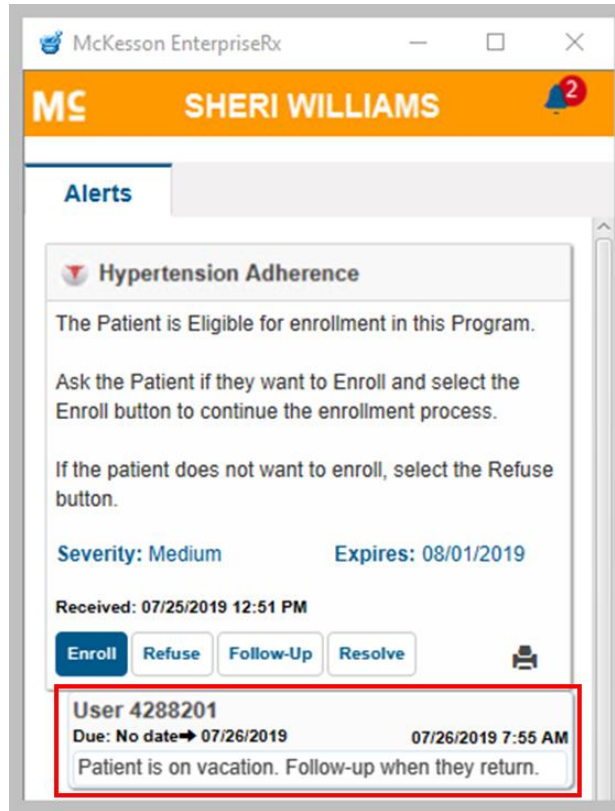


By selecting the **Due** field, you can modify the due date via a calendar widget.

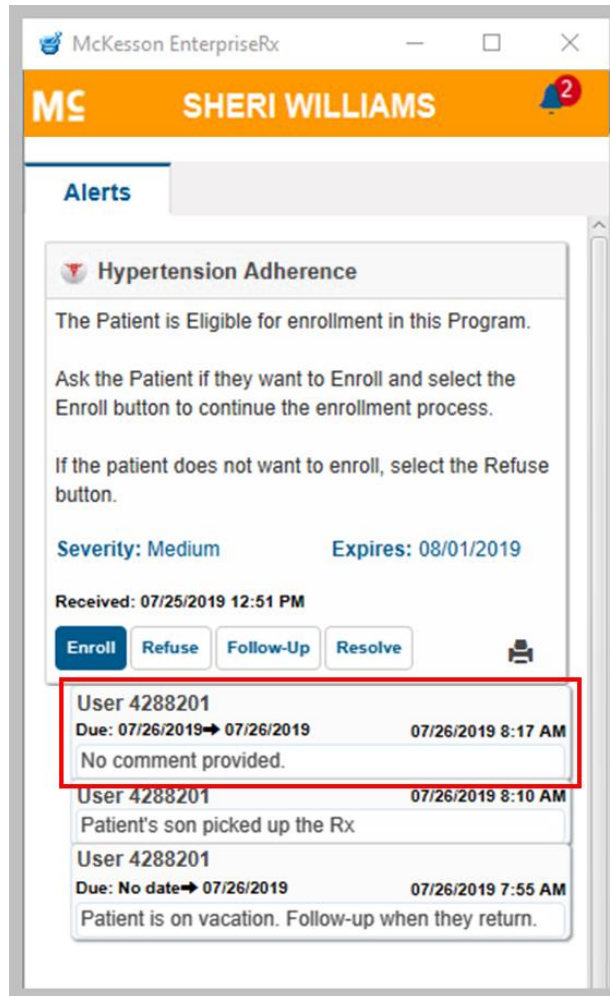
Note: A due date can be, at most, 999 days in the future. If you enter a due date beyond the 999 days maximum, the system will set the due date to the maximum date of 999 days.

After adding a comment and/or changing a message's due date, you can select the check mark icon to save your changes or the **X** icon to cancel your changes.

After a message's due date has been modified, the due date change will be reflected in the title bar of the related comment, as well as in the title bar of the message, and the message's status will be updated to **In Progress**.



Note: If you do not provide a comment when modifying a message's due date, a record of the due date change will be documented with the message, along with the system-generated comment: "No comment provided."



The most recent comment displays immediately under the message, followed by older comments sorted in descending order (newest to oldest). By default, comments will be collapsed. You can select the comment header to expand the comment for viewing.

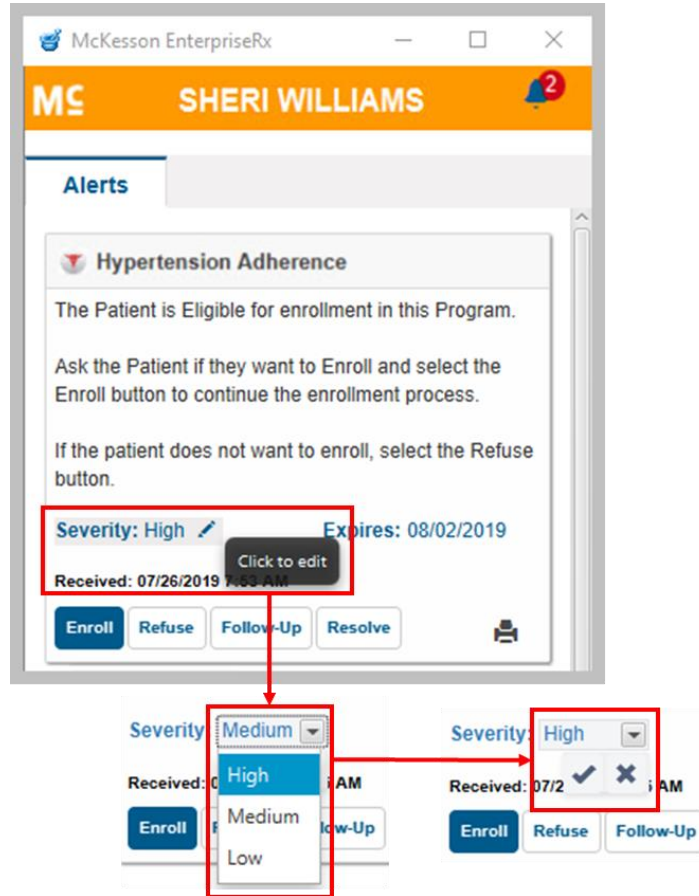
Changing the Expiration Date or Message Severity

The expiration date or severity of a particular message can be edited inline directly from a message within the Clinical App. Note that any changes will override the message settings for expiration and severity that you set up in CPS Program Builder.

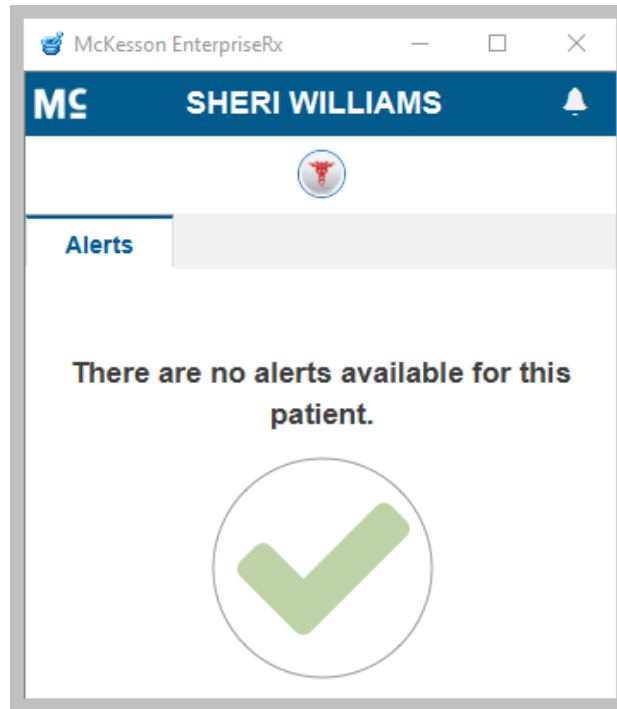
To edit the message severity, either hover over the **Severity** field and select the **Edit** icon when it appears, or continue to hover for several seconds and a **Click to edit** pop-up will appear. You can then select a new severity (**High**, **Medium**, or **Low**) from the dropdown and select the check mark to save the change, or the **X** to cancel the change.

To edit the expiration date, either hover over the **Expires** field and select the **Edit** icon when it appears, or continue to hover for several seconds and a **Click to edit** pop-up will appear. You can then use the calendar widget to select a new date and select the check mark to save the change, or the **X** to cancel the change.

Note: An expiration date can be, at most, 999 days in the future. If you enter an expiration date beyond the 999 days maximum, the system will set the expiration date to the maximum date.



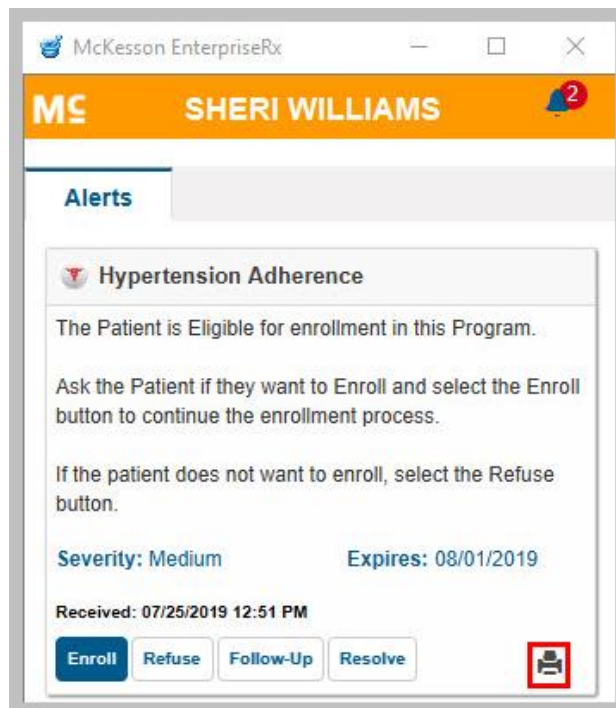
When you have a patient in context, but there are no available alerts for that patient, the following message displays on the **Alerts** tab: “There are no alerts available for this patient”.




Resolving Program Messages

You can use the **Resolve** button to clear the message so that it will stop displaying in the Clinical App and Task Queue.

Printing Program Messages



You can print program messages from the Clinical App and Task Queue. In a message, select the print icon () to print the message. Note that only one message can be printed at a time.

Note: Print functionality is available for EnterpriseRx users on version 9.1 or higher and Pharmaserv users on version 7.5.0.3 or higher.

Accessing Messages through the CPS Task Queue

In addition to being able to see CPS alerts as they come in during a workflow step, you can view these messages at any time in the Task Queue. This chapter covers the Task Queue and the actions you can take on messages in the queue.

The Task Queue is a centralized view of all of the unresolved messages that have come in for patients, both in your local store and - if you do load balancing for another store - the stores in your extended view. Messages will continue to populate in this queue until they have been resolved by a user or they expire. Note that load balancing is not available in Pharmaserv.

The default display of messages within the Task Queue will comply with the home facility of the user who is logged in to EnterpriseRx (in Pharmaserv, this default

display just refers to the individual store’s messages). Messages in this queue will be sorted according to the following schema:

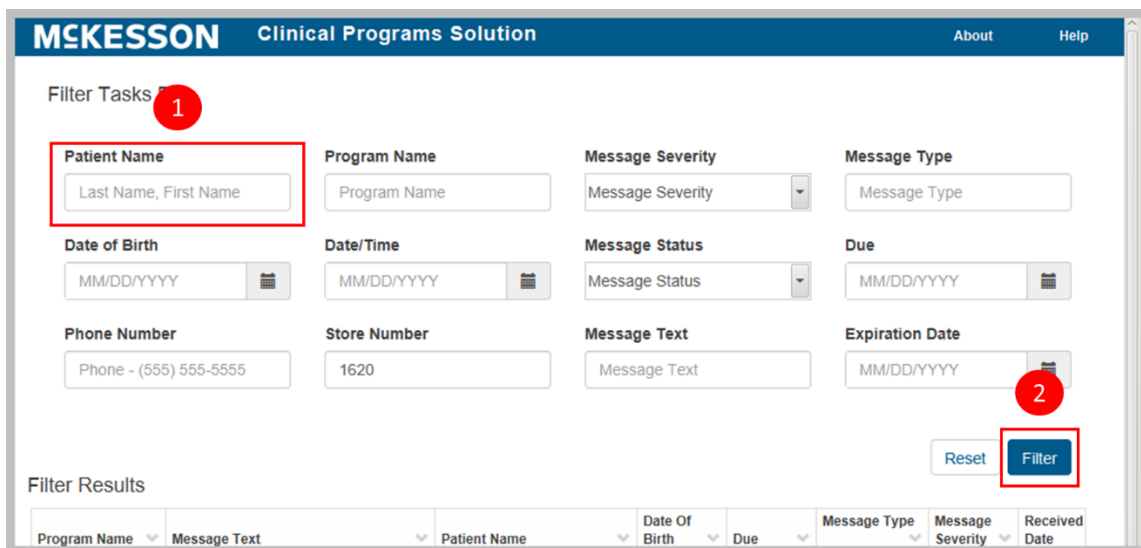
- Last Name, First Name (in ascending order)
- Date of Birth (in ascending order)
- Program message severity (in descending order)
- Date the message was received (from most recent to the oldest)
- Program Name (alphabetically)

Actions You Can Take in the CPS Task Queue

- [Filter Messages](#)
- [Take Action on Task Queue Messages](#)

Filter Messages in the Task Queue

When the Task Queue is opened, the default view will display every message within the configured Due Date Reminder range - for the home facility of the logged-in user - that has not yet been resolved. Because this could be a very large number of messages, the system allows users to filter the messages by any of the following: Patient Name, Program Name, Message Severity, Message Type, patient Date of Birth, Date/Time received, Message Status, Due date, patient Phone Number, Store Number, Message Text and message Expiration Date.



The screenshot shows the 'Filter Tasks' section of the McKesson Clinical Programs Solution interface. It includes several filter criteria: Patient Name (highlighted with a red box and a red circle with '1'), Program Name, Message Severity, Message Type, Date of Birth, Date/Time, Message Status, Due, Phone Number, Store Number, Message Text, and Expiration Date. A 'Filter' button (highlighted with a red box and a red circle with '2') and a 'Reset' button are located at the bottom right of the filter section. Below the filter section, the 'Filter Results' section shows a table with columns for Program Name, Message Text, Patient Name, Date Of Birth, Due, Message Type, Message Severity, and Received Date.

- 1) Enter search criteria into the corresponding text box.
- 2) Select the **Filter** button.

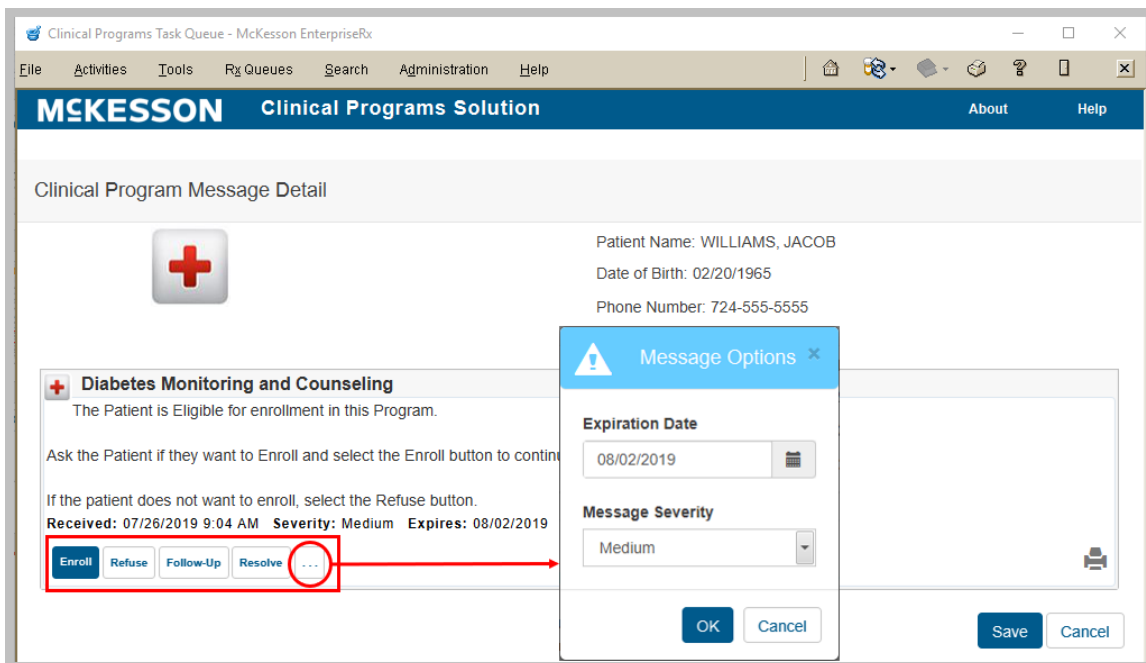
Note: The **Store Number** text box will default to show the store data for the store at which you are logged in. You can change the store number to a store for which


you are load balancing if you load balance CPS messages for that store, or use the comma separator and add multiple stores to the filter. If you are using Pharmaserv, the **Store Number** text box displays the Store's NABP number.

Taking Action on Messages in the Task Queue

After the messages have been filtered, double-click the message and the Clinical Program Message Detail screen will display. From there, you can:

- Choose what action to take on the message, similar to the actions available in the Clinical App if the patient has not enrolled:
 - Enroll a patient
 - Enter a patient's refusal to enroll
 - Enter an optional comment and/or change the message's due date via the **Follow-Up** button
 - Resolve the message
 - Change the message's expiration date and severity using the ellipsis (...) button
 - Print the message

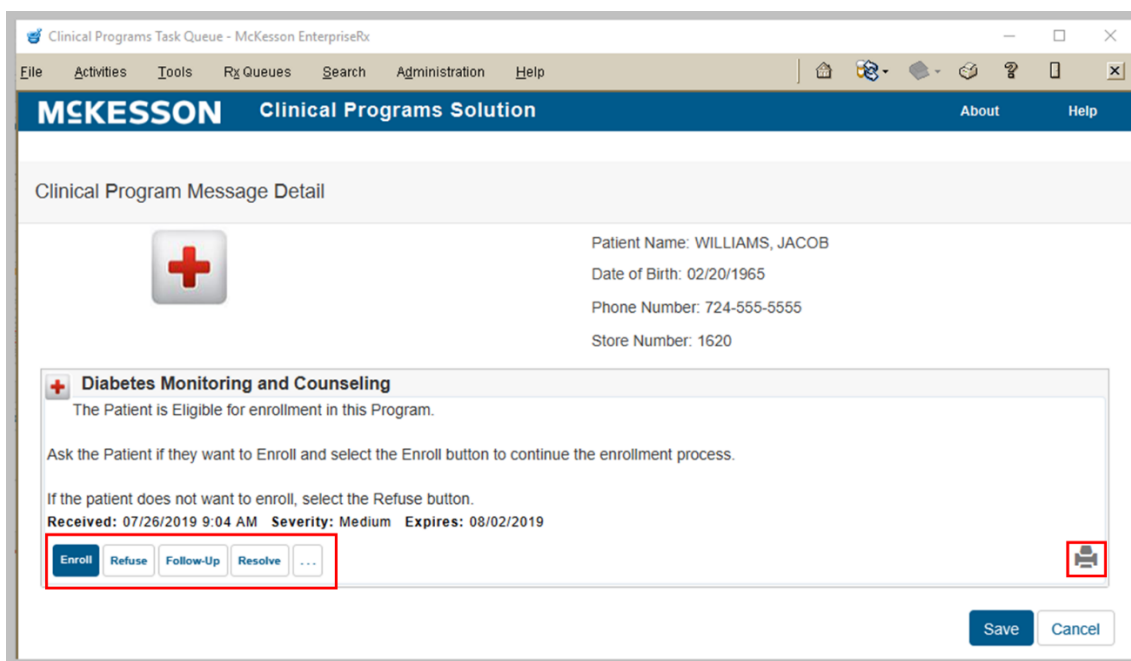


Note: You can use the print icon () to print the message as you can from the Clinical App (see [Printing Messages](#) for more information).

- If the patient has enrolled, the actions are:
 - Complete the questionnaire, if applicable
 - Enter an optional comment and/or change the message's due date via the **Follow-Up** button
 - Resolve the message



- Change the message's expiration date and severity using the ellipsis (...) button
- Print the message



Note: You can use the print icon to print the message as you can from the Clinical App (see [Printing Messages](#) for more information).

Note: Different types of messages will display differently in the Task Queue. Some messages, like vendor activity messages, will contain hyperlinks for you to connect to the vendor site for greater patient and program detail.

Viewing the CPS Patient Profile

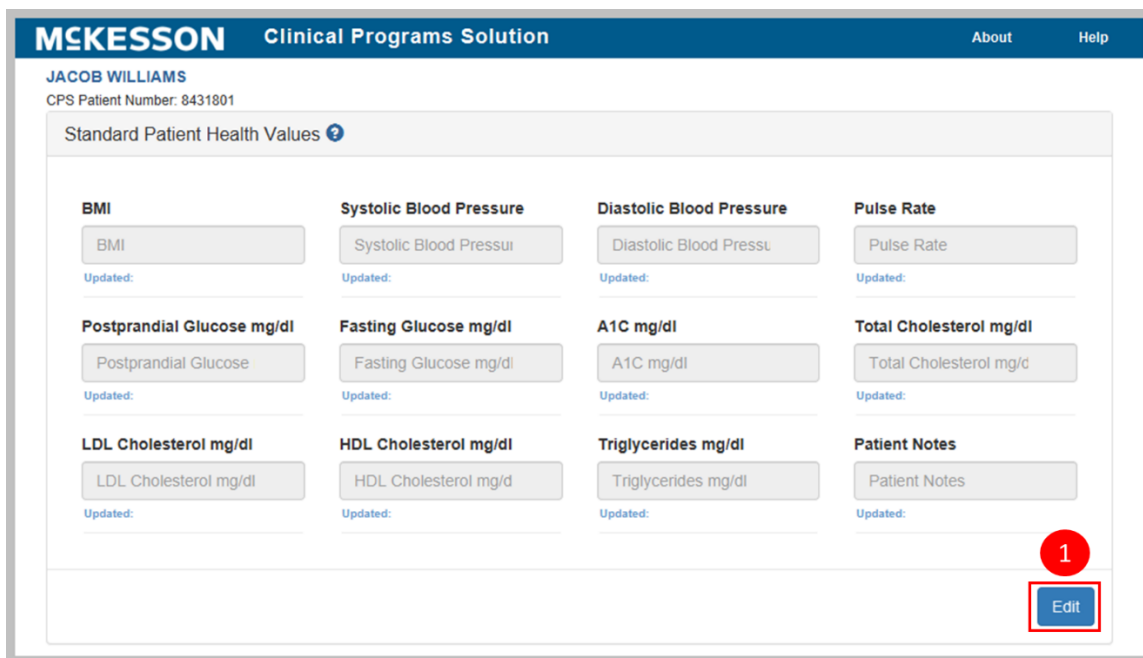
In addition to viewing messages within the Clinical App and Task Queue, users can also view a patient's particular CPS information directly from the CPS Patient Profile. The CPS Patient Profile not only provides information on Program Enrollments and Program Messages, but also allows users to record and view Patient Health Values and export these values to a CSV file.

Actions You Can Take on the CPS Patient Profile

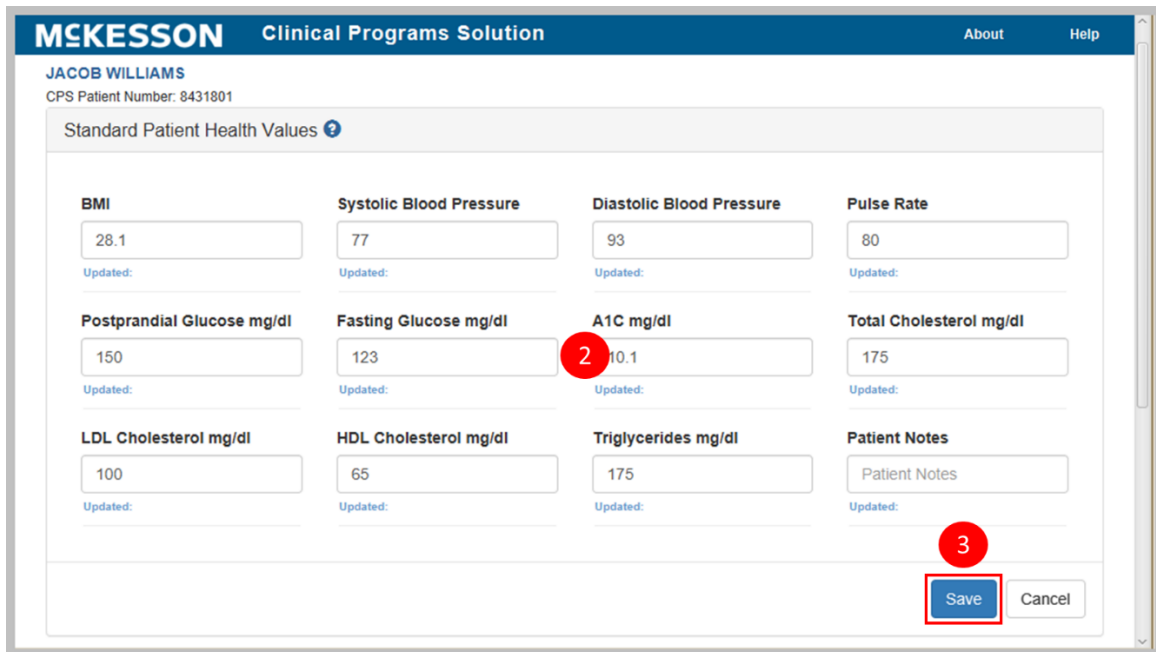
- [Recording New Patient Health Values](#)
- [Viewing & Exporting Historical Patient Health Values](#)
- [Viewing Previously Resolved or Saved In Progress Questionnaires](#)
- [Viewing & Editing Program Enrollments](#)
- [Accessing Patient-specific CPS Task Queue](#)

Recording New Patient Health Values

The **Standard Patient Health Values** section displays the most recent health values collected for the patient. To record new patient health values:



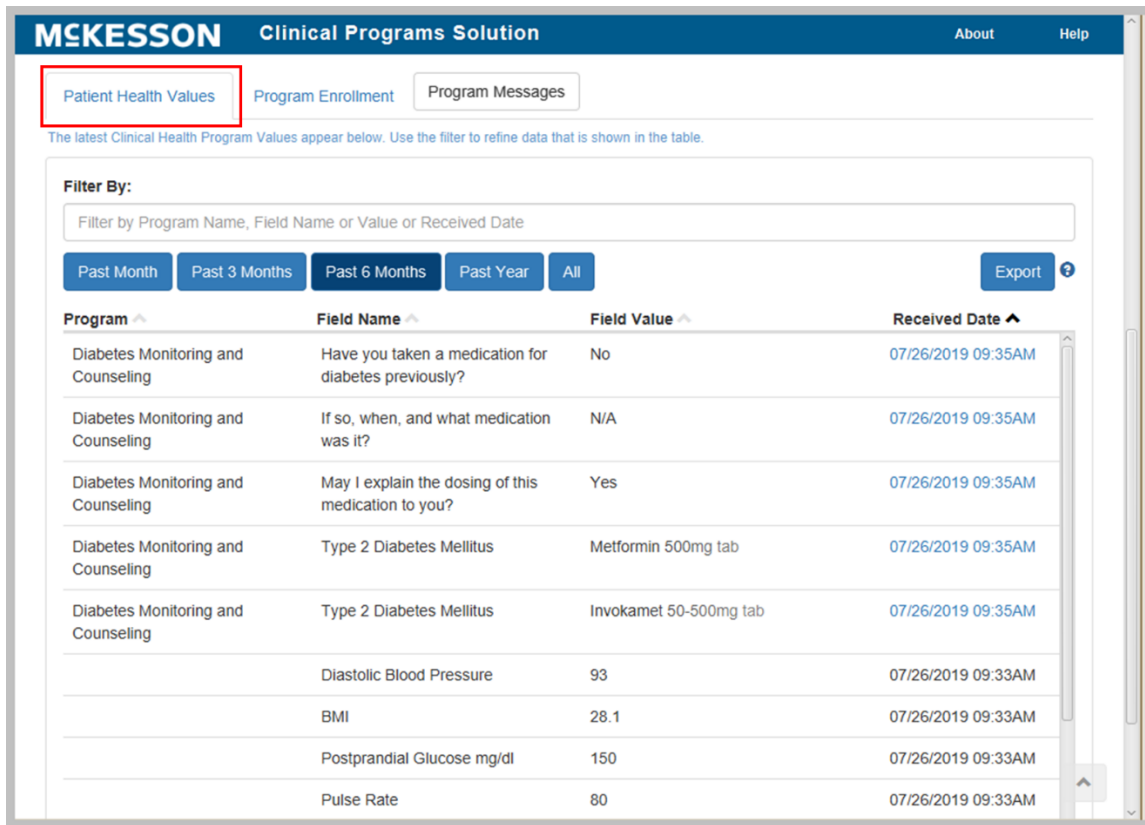
- 1) Select the **Edit** button.



Metric	Value
BMI	28.1
Systolic Blood Pressure	77
Diastolic Blood Pressure	93
Pulse Rate	80
Postprandial Glucose mg/dl	150
Fasting Glucose mg/dl	123
A1C mg/dl	10.1
Total Cholesterol mg/dl	175
LDL Cholesterol mg/dl	100
HDL Cholesterol mg/dl	65
Triglycerides mg/dl	175
Patient Notes	Patient Notes

- 2) Enter the appropriate patient health value or values in the available value fields.
- 3) Select the **Save** button.

Viewing & Exporting Historical Patient Health Values



The latest Clinical Health Program Values appear below. Use the filter to refine data that is shown in the table.

Filter By:

Filter by Program Name, Field Name or Value or Received Date

Past Month Past 3 Months Past 6 Months Past Year All Export

Program	Field Name	Field Value	Received Date
Diabetes Monitoring and Counseling	Have you taken a medication for diabetes previously?	No	07/26/2019 09:35AM
Diabetes Monitoring and Counseling	If so, when, and what medication was it?	N/A	07/26/2019 09:35AM
Diabetes Monitoring and Counseling	May I explain the dosing of this medication to you?	Yes	07/26/2019 09:35AM
Diabetes Monitoring and Counseling	Type 2 Diabetes Mellitus	Metformin 500mg tab	07/26/2019 09:35AM
Diabetes Monitoring and Counseling	Type 2 Diabetes Mellitus	Invokamet 50-500mg tab	07/26/2019 09:35AM
	Diastolic Blood Pressure	93	07/26/2019 09:33AM
	BMI	28.1	07/26/2019 09:33AM
	Postprandial Glucose mg/dl	150	07/26/2019 09:33AM
	Pulse Rate	80	07/26/2019 09:33AM

You can also view the patient's historical patient health values by scrolling down the screen. Select the **Patient Health Values** tab. In this section, users will also see any custom values which were collected using a questionnaire.

In the example above, in addition to the health values that were populated earlier, the values collected on questionnaires, such as previous medication use will be displayed. There is also an **Export** button available here which will allow for the export of the Patient Health Values to a CSV file.

You can also specify a range (**Past Month**, **Past 3 Months**, **Past 6 Months**, **Past Year**, or **All**) and filter the table to view historical patient health values that fall within that range. The default view is **Past 6 Months**.

Viewing Previously Resolved or Saved In Progress Questionnaires

To review previously resolved or saved in progress questionnaires from the **Patient Health Values** table, select the hyperlink in the **Received Date** column for a given questionnaire field. Note that this functionality is available for both self-directed and vendor programs.



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About Help

Patient Health Values
Program Enrollment
Program Messages

The latest Clinical Health Program Values appear below. Use the filter to refine data that is shown in the table.

Filter By:

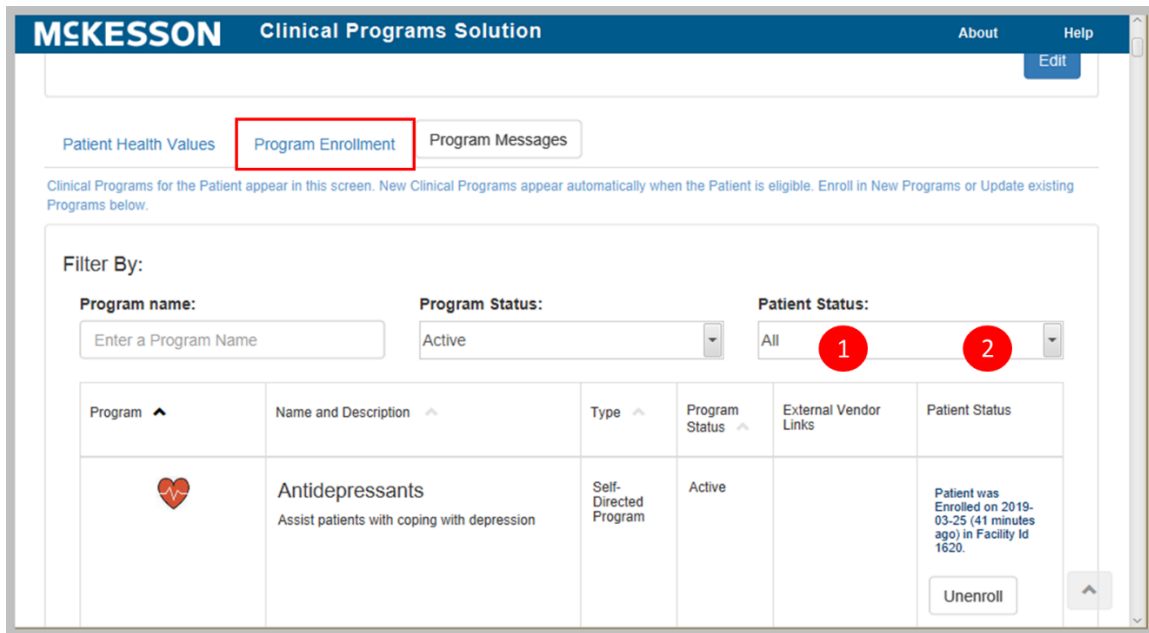
Past Month
Past 3 Months
Past 6 Months
Past Year
All

Export

Program ^	Field Name ^	Field Value ^	Received Date ^
Diabetes Monitoring and Counseling	Have you taken a medication for diabetes previously?	No	07/26/2019 09:35AM
Diabetes Monitoring and Counseling	If so, when, and what medication was it?	N/A	07/26/2019 09:35AM
Diabetes Monitoring and Counseling	May I explain the dosing of this medication to you?	Yes	07/26/2019 09:35AM
Diabetes Monitoring and Counseling	Type 2 Diabetes Mellitus	Metformin 500mg tab	07/26/2019 09:35AM
Diabetes Monitoring and Counseling	Type 2 Diabetes Mellitus	Invokamet 50-500mg tab	07/26/2019 09:35AM
	Diastolic Blood Pressure	93	07/26/2019 09:33AM
	BMI	28.1	07/26/2019 09:33AM
	Postprandial Glucose mg/dl	150	07/26/2019 09:33AM
	Pulse Rate	80	07/26/2019 09:33AM

Viewing & Editing Program Enrollments

To view the enrollment status for the patient, select the **Program Enrollment** tab.



When the **Program Enrollment** tab opens, you will see every self-directed and vendor program which is currently in use for patients at the facility to which he/she is logged in. From here, you can:

- 1) Access links to external websites including Program Website, Patient Website or a link to a custom website which can be indicated when building a program.
- 2) View Enrollment details and enroll/unenroll the patient using the buttons in the **Patient Status** column.

Because this could be any number of programs, the system will allow you to filter by the following options to narrow down your list:

- Program Name
- Program Status (Active, Inactive, All Programs)
- Patient Status (All, Enrolled, Patient Not Asked, Unenrolled, Patient Declined, Vendor Rejected)

As soon as you start typing into one of these filter fields, the list of programs displayed will be narrowed.

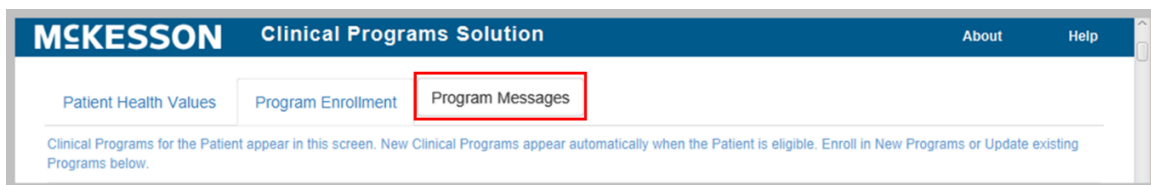
For **Patient Enrollment** programs, the enrolling facility ID will display in the **Patient Status** column if the patient has been enrolled in the program.

Note: If you are using EnterpriseRx, the facility ID corresponds to the enrolling store number; if using Pharmaserv, to the NABP.

For **No Enrollment** programs, the **Patient Status** column will indicate that no enrollment is required, and you can use the links in the **External Vendor Links** column to access additional information through the vendor site.

Accessing the Patient-Specific CPS Task Queue

Within the CPS Patient Profile, the system allows you direct access to the Task Queue to view program messages. To access the Task Queue, select the **Program Messages** tab.



When the Task Queue has been accessed from the CPS Patient Profile, the list of CPS messages will automatically be filtered on the patient from whom you accessed the queue.

From here, users can do work within the Task Queue exactly as described in the [Accessing Messages Through the CPS Task Queue](#) chapter.

Actions You Can Take in a Message's Questionnaire

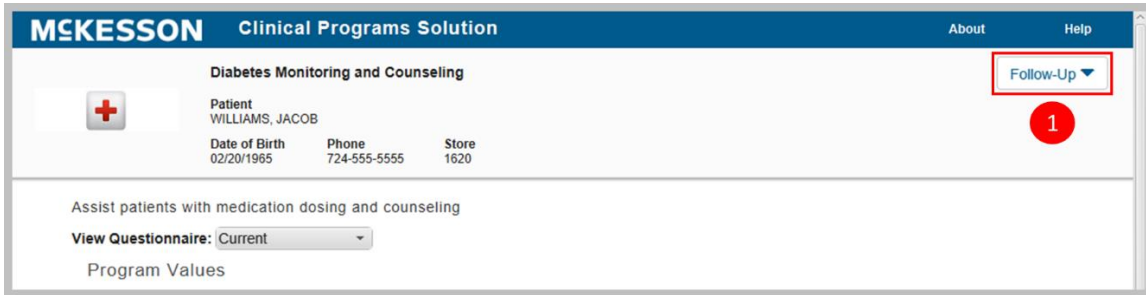
- [Adding a Follow-Up Comment and/or Due Date Change via a Message's Questionnaire](#)
- [Printing Questionnaires](#)

Adding a Follow-Up Comment and/or Due Date Change via a Message's Questionnaire

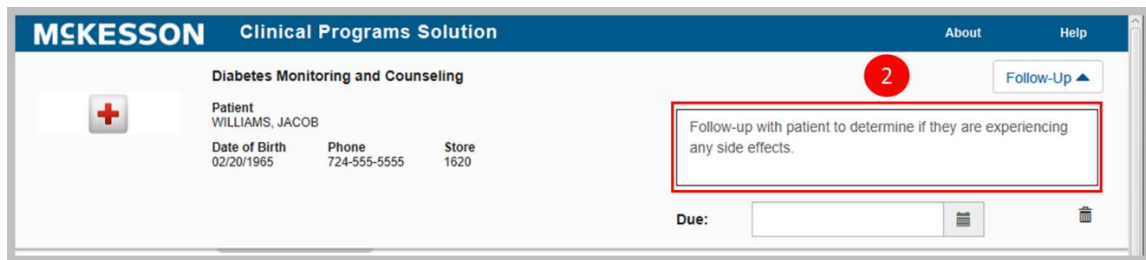
Within a message's questionnaire, you can add an optional comment and/or change the message's due date using the **Follow-Up** button.

Note: Follow-Up functionality is available in Vendor and Self-directed questionnaires. Follow-up functionality will not be available in enrollment questionnaires accessed via the **Program Enrollment** tab in the CPS Patient

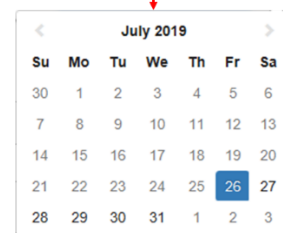
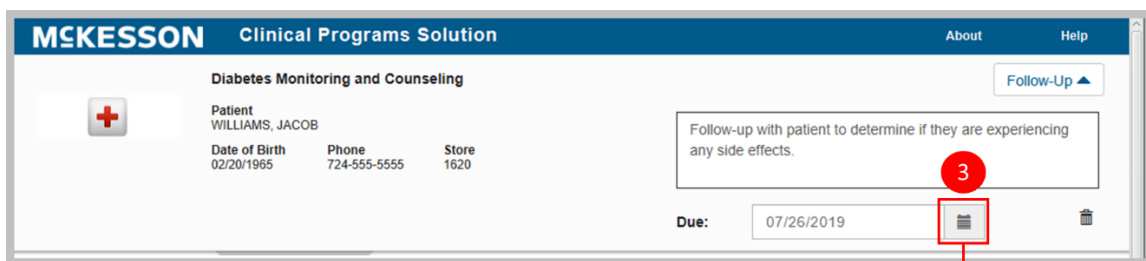
Profile, as well as in questionnaires accessed via the **Patient Health Values** tab in the CPS Patient Profile.



- 1) Select the **Follow-Up** button in the questionnaire. The Follow-Up section will display with a comment text box that allows you to enter an optional comment.



- 2) Enter a comment in the text box.



- 3) Use the pop-up calendar to change the message's due date or enter the due date directly into the **Due** field in mm/dd/yyyy format. To use the pop-up, select the calendar icon (📅) in the **Due** field to change the message's due date. When the calendar opens, it will display today's date, and enter that date into

the **Due** field. Use the forward or back arrows (< or >) to move forward or backward in the calendar.

Note: A due date can be, at most, 999 days in the future. If you enter a due date beyond the 999 days maximum, the system will set the due date to the maximum date.

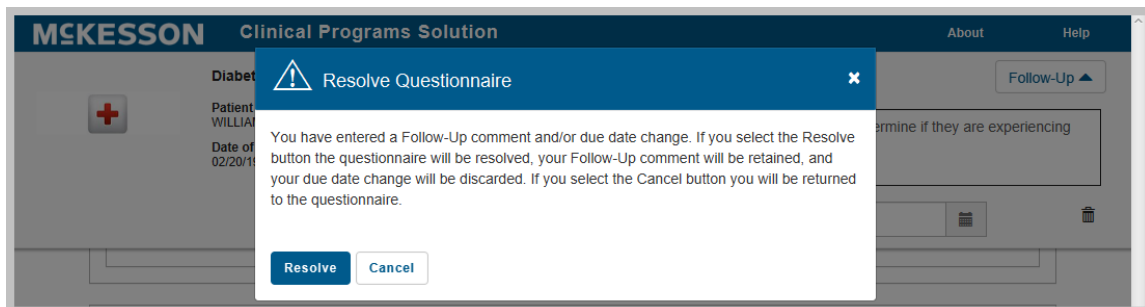
Note: You can discard a Follow-Up comment and/or due date change by selecting the trash can icon (🗑️) in the Follow-Up section.

Note: The result of a Follow-Up comment and/or due date change will differ depending upon if you select the **Save Progress** or **Resolve** button in the questionnaire:

- When you select the **Save Progress** button, the questionnaire values will be saved to the CPS Patient Profile (if applicable), the **Document** button will be updated to an **In Progress** button, and your Follow-Up comment and/or due date change (if applicable) will be applied to the message.

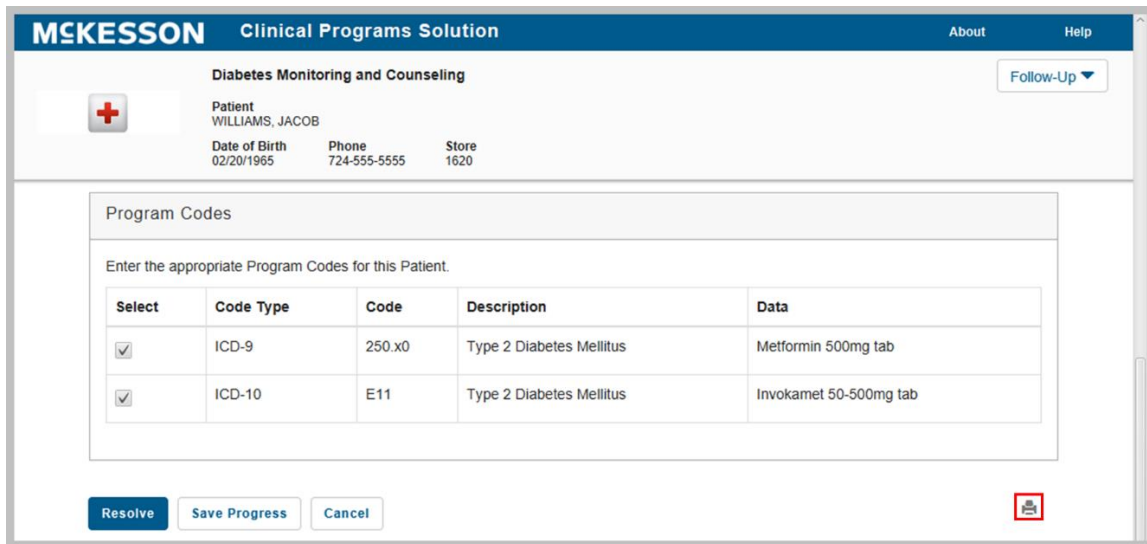
Note: When a questionnaire associated to a message is saved with a Follow-Up comment and/or due date change, the message's status will be updated to **In Progress**.

- When you select the **Resolve** button and you have added a Follow-Up comment and/or due date change, you will be prompted with a confirmation dialog.




When you select the **Resolve** button in the confirmation dialog, the questionnaire values will be saved to the CPS Patient Profile (if applicable), the message will be resolved, and your Follow-Up comment (if applicable) will be retained, but your due date change (if applicable) will be discarded. When you select the **Cancel** button in the confirmation dialog, you will be returned to the questionnaire.

Printing Questionnaires



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Diabetes Monitoring and Counseling Follow-Up ▾


 Patient
WILLIAMS, JACOB


Date of Birth 02/20/1965 Phone 724-555-5555 Store 1620

Program Codes

Enter the appropriate Program Codes for this Patient.

Select	Code Type	Code	Description	Data
<input checked="" type="checkbox"/>	ICD-9	250.x0	Type 2 Diabetes Mellitus	Metformin 500mg tab
<input checked="" type="checkbox"/>	ICD-10	E11	Type 2 Diabetes Mellitus	Invokamet 50-500mg tab

Resolve Save Progress Cancel 

You can print a questionnaire associated to a messages by selecting the print icon () within the questionnaire. Note that only one questionnaire can be printed at a time.

Note: Print functionality is available for EnterpriseRx users on version 9.1 or higher and Pharmserv users on version 7.5.0.3 or higher.



CPS Check-In Programs

Overview

The Check-In functionality allows you to build a program that alerts pharmacy staff and allows for documentation of a patient interaction on a scheduled, time-based recurrence. Check-In programs are enrollment based, either triggered by workflow, bulk enrollment, or manual enrollment. Once enrolled, patients have scheduled interactions with the pharmacy that do not require a prescription to be processed. The scheduled time interval is set at a program level, but can be overridden at the patient level on a case-by-case basis. The associated documentation for the Check-In program will provide a new patient assessment questionnaire with each interaction, with easy access and clear visibility to past documentation. Check-In programs differ from traditional questionnaire programs in that traditional programs provide a one-time message with a single questionnaire. Traditional messages might have short term follow-up recurrences, but are not intended for on-going interactions requiring new documentation with each occurrence. Check-In programs may be used for chronic care and adherence programs, wellness programs, or any program that would require regularly scheduled patient interactions.

The Check-In program feature is only available with the CPS Premium Subscription. Please contact your Account Manager or Account Executive for more information.

Building a Check-In Program

Similar to traditional self-directed programs, the configuration of a Check-In program is highly customizable. The steps outlined below are unique to building a Check-In program. For additional information on building clinical programs, refer to the [Building Clinical Programs](#) chapter.

Steps to Building a Check-In Program:

- [Getting Started with Program Builder](#)
- [Designating a Program as a Check-In Program](#)
- [Building a Check-In Program's Questionnaire](#)
- [Saving a Check-In Program](#)

Getting Started with Program Builder

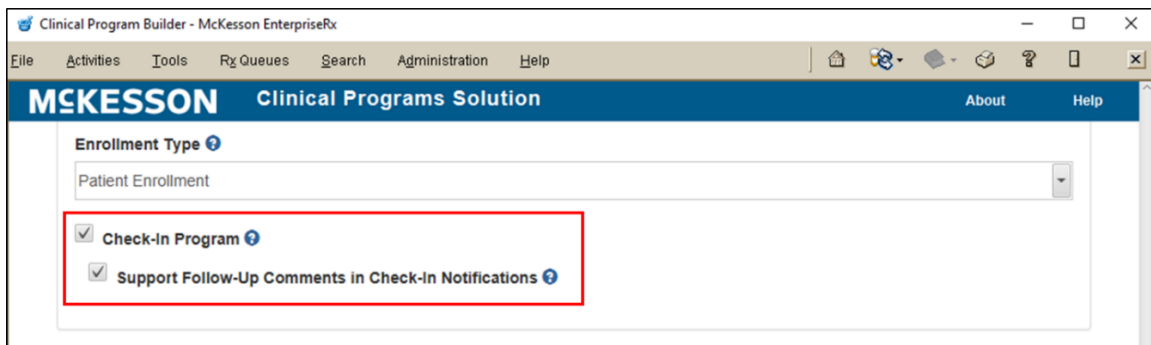


To get started, navigate to **CPS Program Builder**.

Once **CPS Program Builder** is displayed, select the **Add Program** button.

Designating a Program as a Check-In Program

Through Program Builder, you can designate a self-directed program as a Check-In program, using the **Check-In Program** checkbox. This checkbox only displays for programs with an **Enrollment Type** of **Patient Enrollment**. If you do not have the CPS Premium Subscription, this checkbox is disabled and cannot be selected.



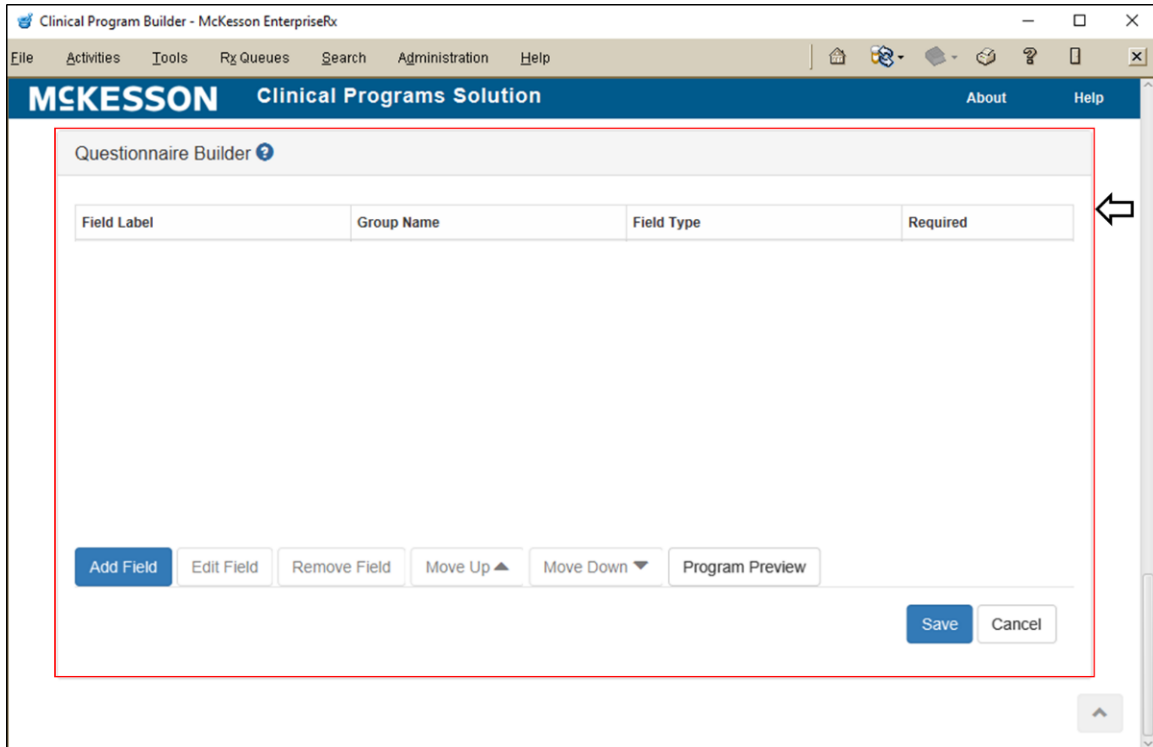
To Build a Check-In Program: Select the **Check-In Program** checkbox.

When the **Check-In Program** checkbox is selected, the **Support Follow-Up Comments in Check-In Notifications** checkbox is enabled and, by default, selected. This checkbox allows pharmacy staff to add Follow-Up comments in Check-In notifications. Unselect the **Support Follow-Up Comments in Check-In Notifications** checkbox if you do not want pharmacy staff to add Follow-Up comments in Check-In Notifications.

Note: McKesson does not recommend converting an existing self-directed program to a Check-In program, or vice versa, as patient enrollment and any existing Program Messages will be retained, if applicable. Additionally, when an existing self-directed program is converted to a Check-In program, a patient's recurrence schedule will be based on previous questionnaire submissions for the program.

Building a Check-In Program's Questionnaire

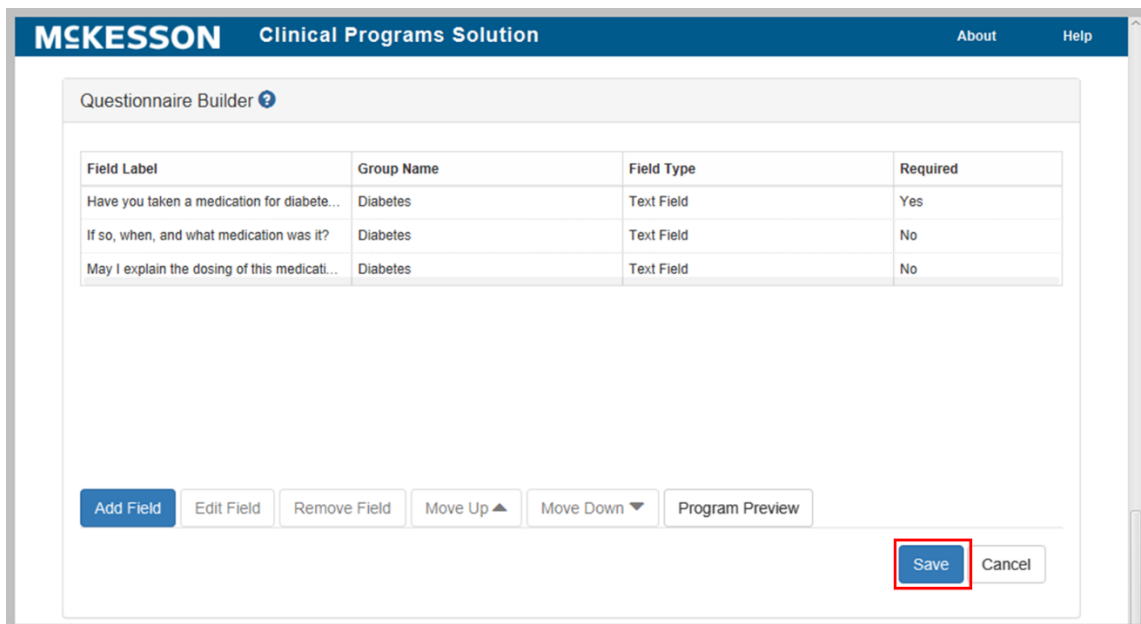
Once the **Check-In Program** checkbox is selected for a program, you will be required to build a questionnaire before you can save the program.



Note: The **Questionnaire Builder** section will highlight red when the **Check-In Program** checkbox is selected for a program.

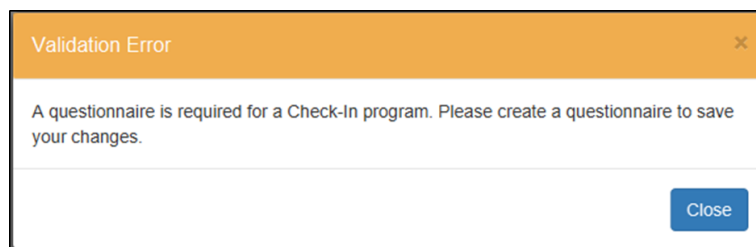
To Build a Check-In Program's Questionnaire: The **Questionnaire Builder** section allows for the building of the questionnaire that will be associated to any Check-In notifications for the program, as well as any enrollment messages. Refer to the [Building Questionnaires](#) and [Modifying Questionnaires](#) sections for more information on building/modifying a questionnaire.

Saving a Check-In Program



When all fields have been added, save your program by selecting the **Save** button at the bottom of the CPS Program Builder page, or **Cancel** to discard the changes.

Note: You will be prompted with a warning dialog if you attempt to save a Check-In program without building a questionnaire.

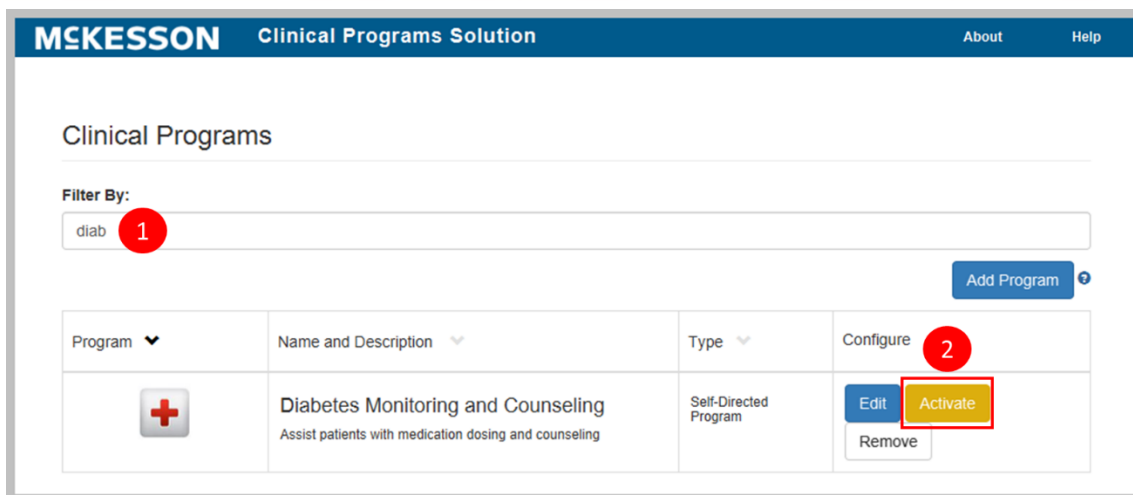


Once you've finished building your program you're ready to move on to [Activating a Check-In Program](#).

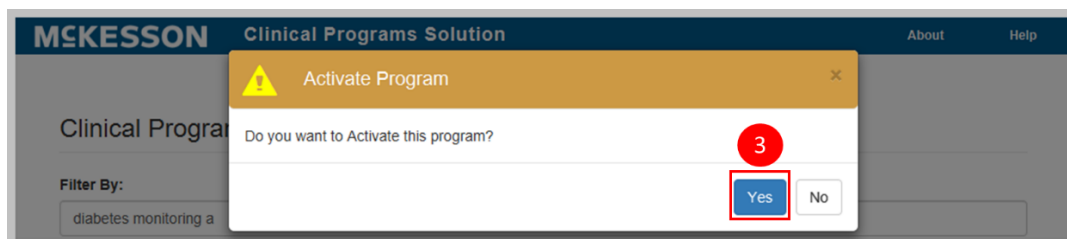
Activating a Check-In Program

After building a Check-In program, the next step is to activate it.

To activate the program, navigate to Program Builder:



- 1) Type the program name into the **Filter By** text box. If several names begin with the same character string, they will all show in the list. The more characters that are entered into the filter, the fewer entries that will be contained in the list.
- 2) When the program displays in the list, select the **Activate** button.



- 3) Select **Yes** from the pop-up window to activate the program.

After activating the program, the next step is to configure it. Go to [Configuring a Check-In Program](#) to continue.

Configuring a Check-In Program

After a Check-In program has been built and activated, the next step is to configure it using Program Admin. When configuring a Check-In program, the **Check-In Settings** section will allow you to control when Check-Ins will display and become due in the Clinical App.

Note: For additional information on configuring programs, refer to the [Configuring Clinical Programs](#) section.

Steps for Configuring a Check-In Program:

[Configuring a Check-In Program](#)

[Setting the Recurrence for a Check-In Program](#)

[Setting the Due Date Reminder for a Check-In Program](#)

[Patient Enrollment for a Check-In Program](#)

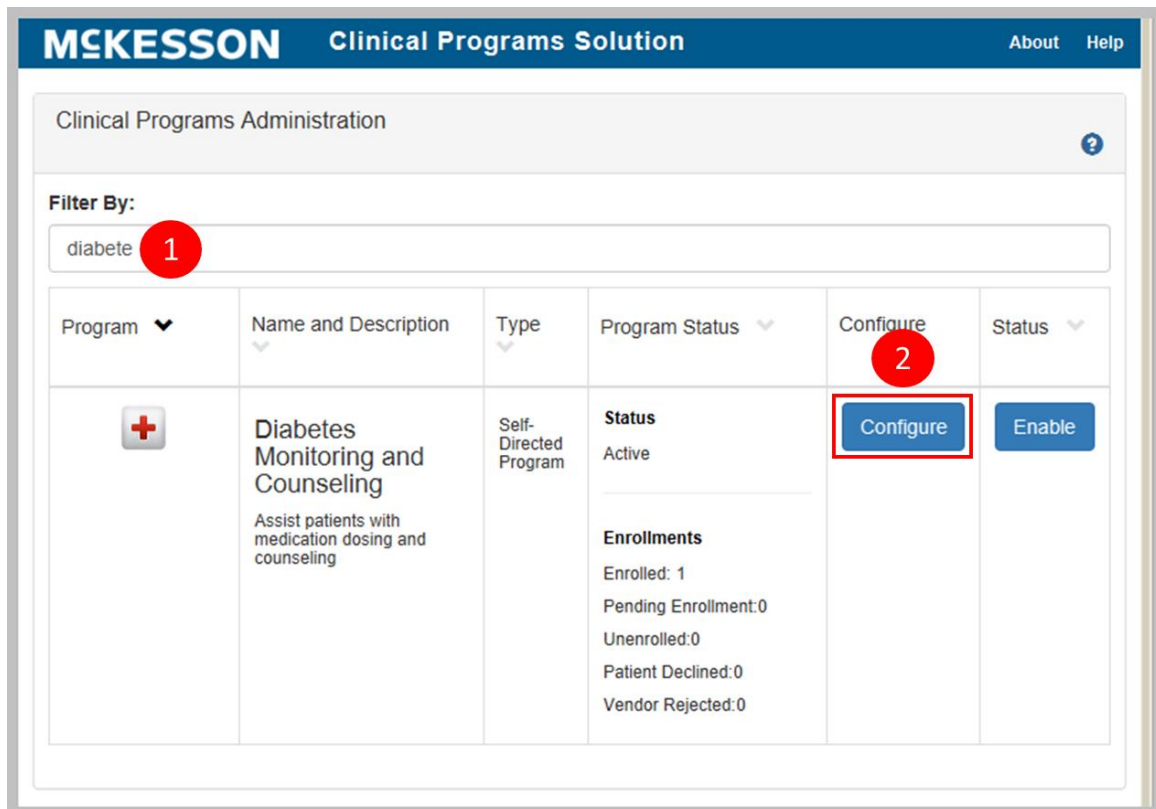
[Bulk Messaging for a Check-In Program](#)

[Saving a Check-In Program's Configuration](#)

[Enabling a Check-In Program](#)

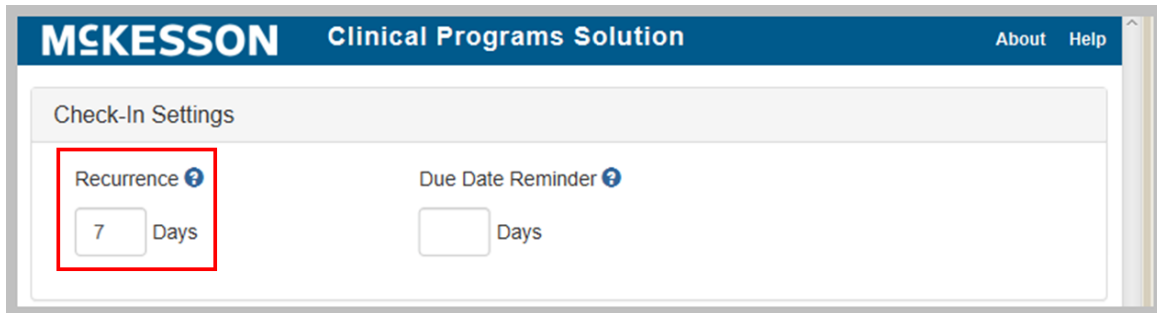
Configuring a Check-In Program

Navigate to CPS Program Admin:



- 1) Type the program name into the **Filter By** text field. If several names begin with the same character string, they will all show in the list. The more characters that are entered into the filter, the fewer entries that will be contained in the list.
- 2) Select the **Configure** button next to the program when it displays in the list.

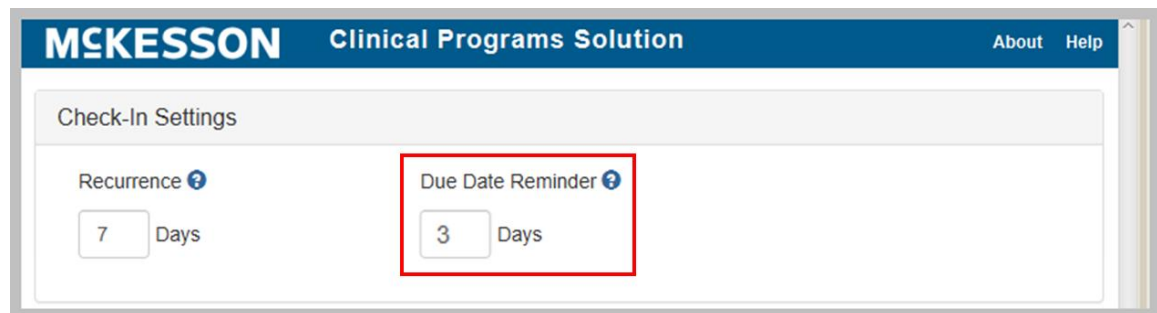
Setting the Recurrence for a Check-In Program



A Check-In program's **Recurrence** field allows you to specify how often the Check-In will become due for patients enrolled in the program. You can input a number from **0** to **999** in the **Recurrence** field.

A Check-In Program's **Recurrence** field can be configured at a corporate root or facility level.

Setting the Due Date Reminder for a Check-In Program



In a Check-In program's **Due Date Reminder** field, you can specify when, in number of days before the Check-In is due, the Check-In will appear in the Clinical App **Alerts** tab and when the Check-In will appear as due in the Clinical Snapshot. You can input a number from **0** to **999** in the **Due Date Reminder** field. A Check-In program's **Due Date Reminder** field can be configured at a corporate root or facility level.

Note: If a Check-In has a defined due date but the Check-In program's **Due Date Reminder** field is set to **0**, when the Check-In's due date is reached, the Check-In will appear in the Clinical App **Alerts** tab and will appear as due in the Clinical Snapshot. If a Check-In has a defined due date but the Check-In program's **Due Date Reminder** field is set to **<blank>**, the Check-In will always appear in the Clinical App **Alerts** tab and will always appear as due in the Clinical Snapshot.

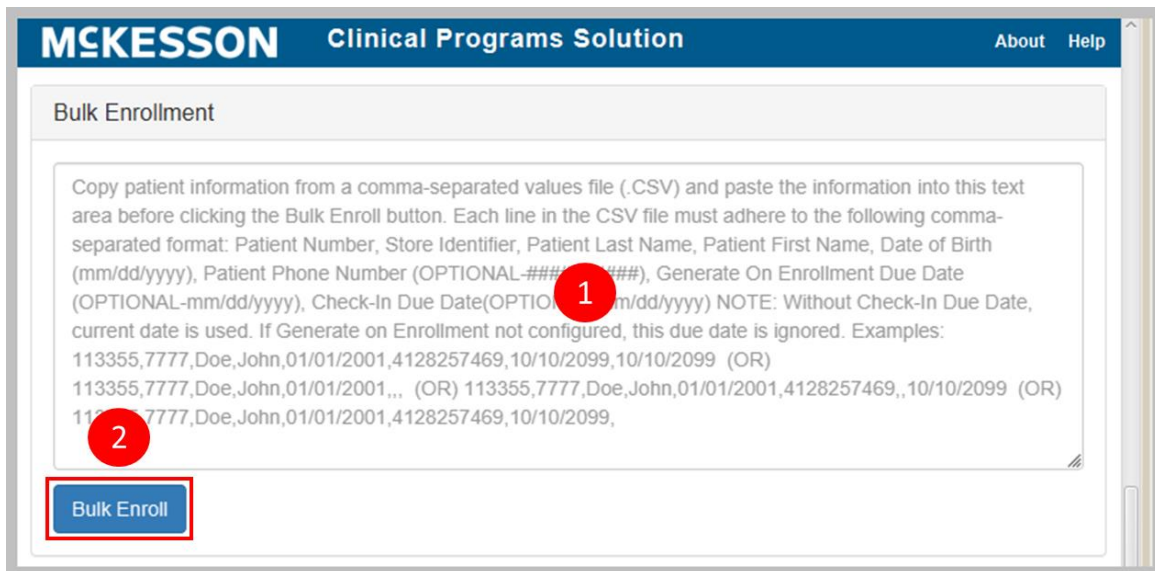
Patient Enrollment for a Check-In Program

Patient Enrollment

A patient can be enrolled in a Check-In program via an enrollment message, the **Program Enrollment** tab within the CPS Patient Profile, or Bulk Enrollment.

Bulk Enrollment

When bulk enrolling patients into a Check-In program, you can specify a one-time override of a patient's Check-In due date.



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Bulk Enrollment

Copy patient information from a comma-separated values file (.CSV) and paste the information into this text area before clicking the Bulk Enroll button. Each line in the CSV file must adhere to the following comma-separated format: Patient Number, Store Identifier, Patient Last Name, Patient First Name, Date of Birth (mm/dd/yyyy), Patient Phone Number (OPTIONAL-###-####), Generate On Enrollment Due Date (OPTIONAL-mm/dd/yyyy), Check-In Due Date(OPTIONAL-mm/dd/yyyy) NOTE: Without Check-In Due Date, current date is used. If Generate on Enrollment not configured, this due date is ignored. Examples:
 113355,7777,Doe,John,01/01/2001,4128257469,10/10/2099,10/10/2099 (OR)
 113355,7777,Doe,John,01/01/2001,, (OR) 113355,7777,Doe,John,01/01/2001,4128257469,,10/10/2099 (OR)
 113355,7777,Doe,John,01/01/2001,4128257469,10/10/2099,

Bulk Enroll

- 1) Enter the desired patient information from a CSV file in the **Bulk Enrollment** field. McKesson recommends that you display the CSV file in a text-editing application such as Notepad, copy it, and then paste it directly into this field.

When completing Bulk Enrollment for a Check-In program, each line in the list must follow this comma separated format: **Patient Number, Store Identifier, Patient Last Name, Patient First Name, Date of Birth, Phone Number, Generate On Enrollment Due Date, Check-In Due Date**. Each row must contain seven commas.

Note the following **specifics about these attributes**:

- **Patient Number** - Required. Numeric characters only. Maximum length is 18 characters.
- **Store Identifier** - Required. Maximum length is 50 characters.
- **Patient Last Name** - Required. Maximum length is 50 characters.
- **Patient First Name** - Required. Maximum length is 50 characters.
- **Date of Birth** (in mm/dd/yyyy format) - Required. Maximum length is ten characters.

- **Phone Number** (in ##### format) - Optional. Numeric characters only. Maximum length is ten characters. Phone Number area codes cannot start with the numeral “1”.
- **Generate On Enrollment Due Date** (in mm/dd/yyyy format) - Optional. Maximum length is ten characters. When a date is provided in the **Generate On Enrollment Due Date** field, the due date for each Generate On Enrollment message configured for the program will be set to the specified date. When the **Generate On Enrollment Due Date** field is left blank, there will be no due date set on each Generate On Enrollment message configured for the program. Any message that is configured to generate on enrollment will have an **Unread Message Status**.

Note: The **Generate On Enrollment Due Date** field will display regardless of if there is a Generate On Enrollment message configured for the program. If a Generate On Enrollment message is not configured for the program, then the **Generate On Enrollment Due Date** field may be left blank; if a Generate On Enrollment message is not configured for the program and a date is provided in the **Generate On Enrollment Due Date** field, then the date provided will be ignored.

- **Check-In Due Date** (in mm/dd/yyyy format) – Optional. Maximum length is ten characters. When a date is provided in the **Check-In Due Date** field, the due date for the patient’s Check-In will be set to the specified date. When the **Check-In Due Date** field is left blank, the due date for the patient’s Check-In will be set to the current date.

Bulk Enrollment accepts the following characters in the **Patient First Name** and **Patient Last Name** fields:

- Apostrophe (')
- Hyphen (-)
- Blank space ()
- Alphabetic (uppercase and lowercase)
- Numeric characters (0 - 9)
- Underscore (_)
- Period (.)

- 2) Select the **Bulk Enroll** button. If there are any issues with the submission (for example, an error in formatting), a warning dialog will display. You can make the suggested correction and retry the bulk enrollment. A success dialog will appear if there were no issues with the submission.

Note: If Bulk Enrollment is attempted for a patient already enrolled in the Check-In program, the patient’s enrollment status and alerts will not be updated.

Patient Unenrollment

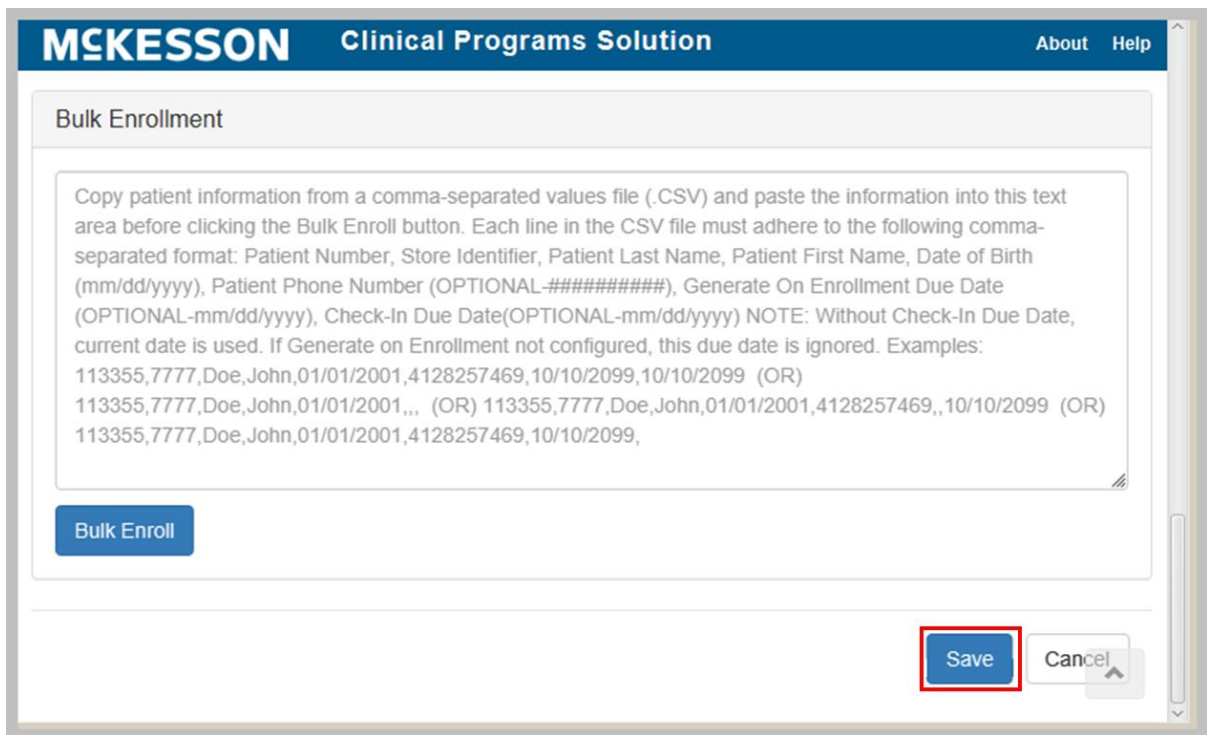
Unenrollment from a Check-In program will be managed via the **Program Enrollment** tab within the CPS Patient Profile. When a patient is unenrolled, the program's alerts will no longer display for the patient.

Bulk Messaging for a Check-In Program

Bulk Messaging allows you to generate program messages for a specified list of patients outside of prescription processing. Both Standard or Questionnaire program messages configured for a given Check-In program are available for use with the Bulk Messaging feature.

For more information on the Bulk Messaging feature, refer to the [Bulk Messaging Patients Outside of Prescription Processing](#) section.

Saving a Check-In Program's Configuration



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Bulk Enrollment

Copy patient information from a comma-separated values file (.CSV) and paste the information into this text area before clicking the Bulk Enroll button. Each line in the CSV file must adhere to the following comma-separated format: Patient Number, Store Identifier, Patient Last Name, Patient First Name, Date of Birth (mm/dd/yyyy), Patient Phone Number (OPTIONAL-#####), Generate On Enrollment Due Date (OPTIONAL-mm/dd/yyyy), Check-In Due Date(OPTIONAL-mm/dd/yyyy) NOTE: Without Check-In Due Date, current date is used. If Generate on Enrollment not configured, this due date is ignored. Examples:

```
113355,7777,Doe,John,01/01/2001,4128257469,10/10/2099,10/10/2099 (OR)
113355,7777,Doe,John,01/01/2001,, (OR) 113355,7777,Doe,John,01/01/2001,4128257469,,10/10/2099 (OR)
113355,7777,Doe,John,01/01/2001,4128257469,10/10/2099,
```

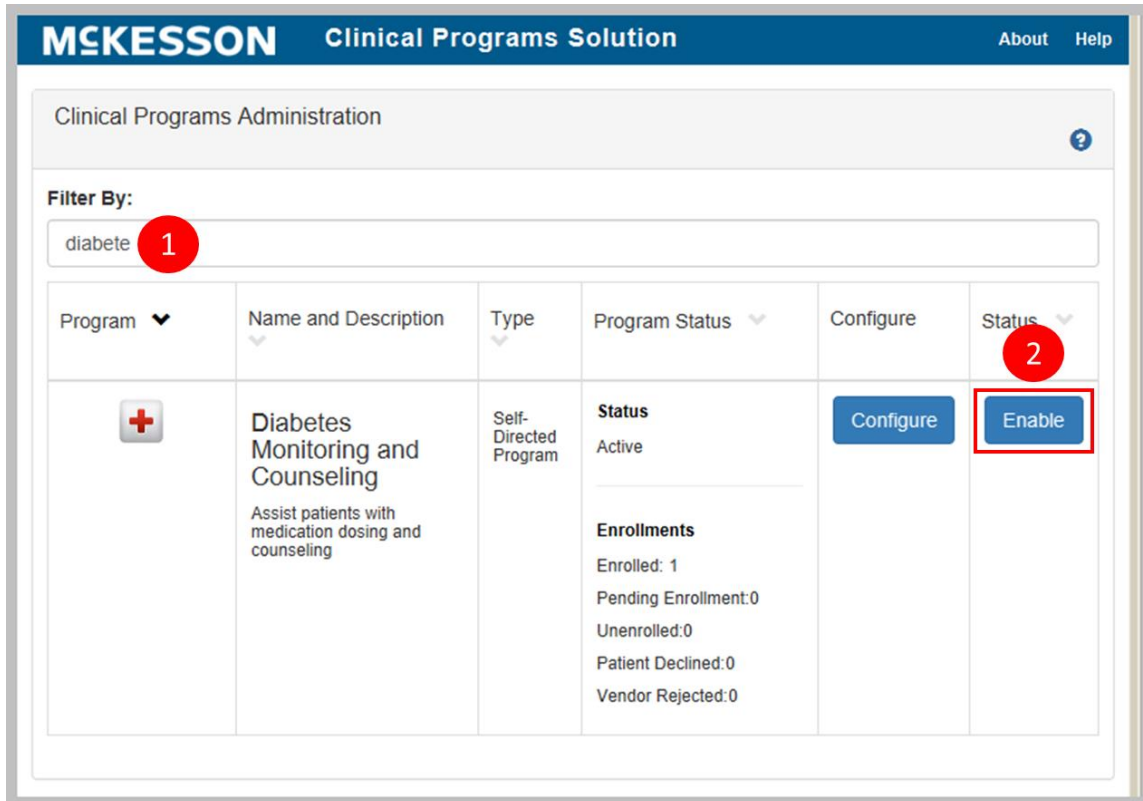
Bulk Enroll

Save Cancel

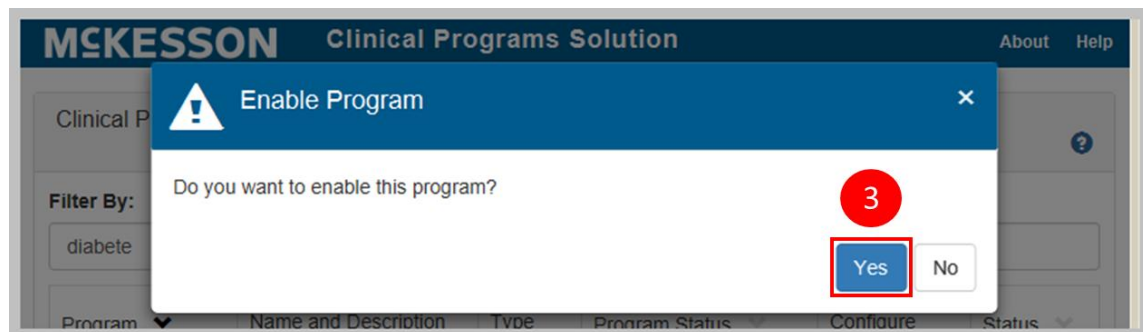
Once you have finished configuring the Check-In program, select the **Save** button. Now you are ready to enable the Check-In program. Go to the chapter [Enabling a Check-In Program](#) to finish the program.

Enabling a Check-In Program

After you have configured your Check-In program the last step is to enable the program. The program needs to be enabled so that it can be utilized by users.



- 1) Type the program name into the **Filter By** text field. If several names begin with the same character string, they will all show in the list. The more characters that are entered into the field, the fewer entries that will be contained in the list.
- 2) Once the program displays in the list, select the **Enable** button.

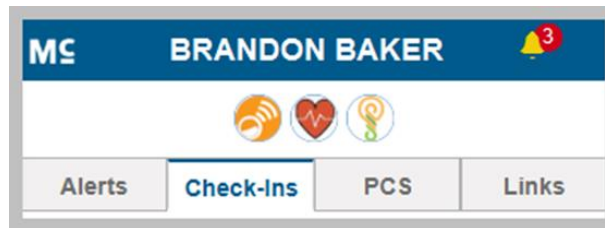


- 3) Select **Yes** to enable the program.
Now the program is ready for pharmacy staff to use.

Check-In Notifications in the Clinical App

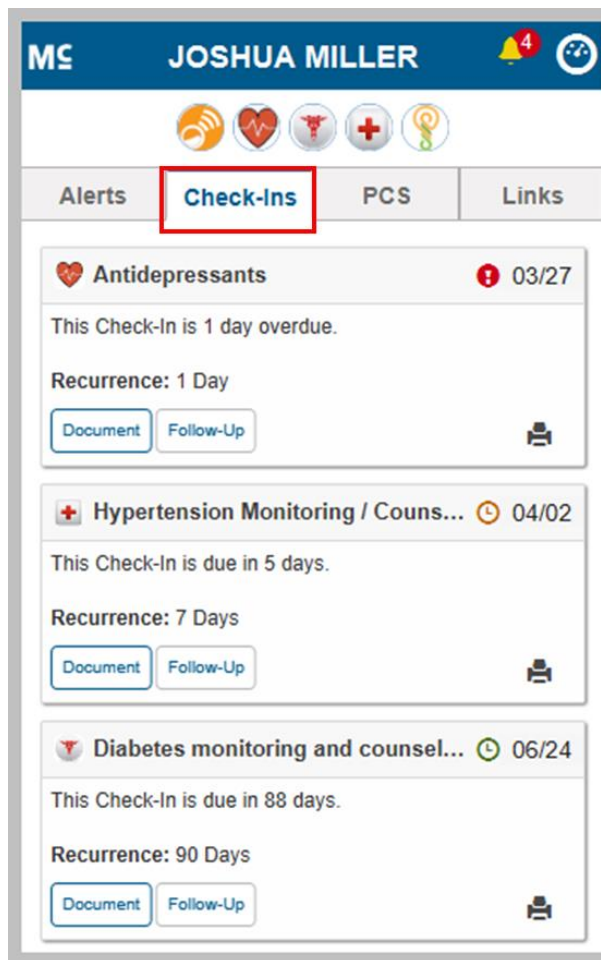
Once a Check-In program has been built, activated, configured, and enabled, pharmacy staff can enroll patients into the program and start documenting patient interactions on a scheduled, time-based recurrence. This chapter will outline how Check-In notifications will display in the Clinical App, and the actions that can be taken on Check-In notifications.

Check-In Notification Display and Actions



Clinical App Check-Ins Tab

The **Check-Ins** tab in the Clinical App allows you to easily view all Check-In notifications for a given patient, regardless of due date. The **Check-Ins** tab only displays if the patient in context is enrolled in at least one Check-In program that is enabled in the logged in facility. Check-In notifications will only display in the **Check-Ins** tab when the associated Check-In program is enabled in the logged in facility.



The **Check-Ins** tab sorts by due date, then in alphabetical order in the following prioritized segments:

1. Check-Ins with a due date in the past
2. Check-Ins with a due date within the **Due Date Reminder** range
3. Check-Ins with a due date in the future (outside of the **Due Date Reminder** range)
4. Check-Ins without a defined due date

Clinical App Alerts Tab

For higher visibility, Check-Ins will also display in the **Alerts** tab of the Clinical App if the Check-In has a due date in the past or within the Check-In program's **Due Date Reminder** range. Check-In notifications will only display in the **Alerts** tab when the associated Check-In program is enabled in the logged in facility.

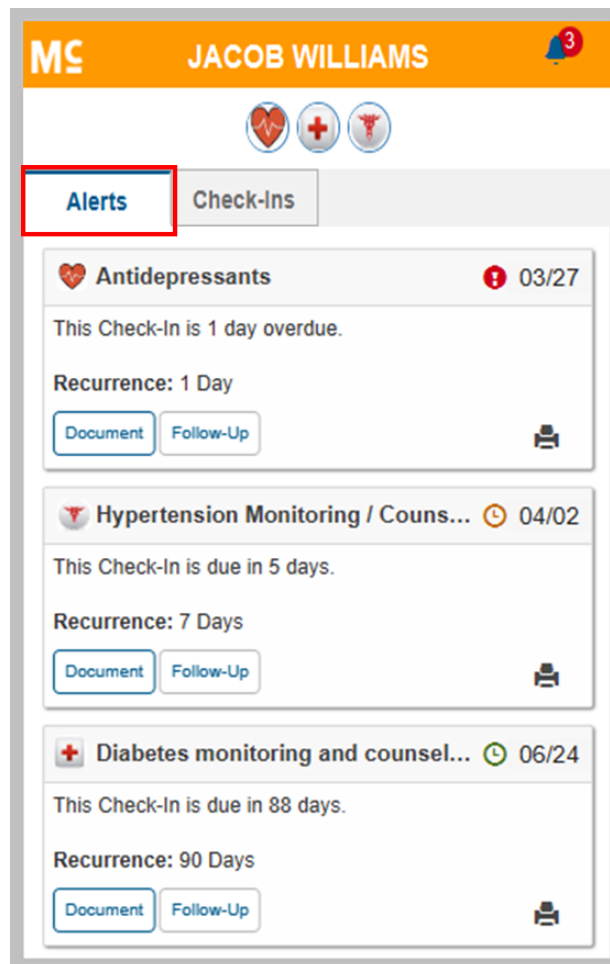
Note: If a Check-In has a defined due date but the Check-In program's **Due Date Reminder** field is set to **0**, when the Check-In's due date is reached, the Check-In will appear in the **Alerts** tab within the Clinical App. If a Check-In has a defined due

date but the Check-In program's **Due Date Reminder** field is set to **<blank>**, the Check-In will always appear in the **Alerts** tab.

When the patient in context has a Check-In with a due date in the past or within the Check-In program's **Due Date Reminder** range, the Clinical App header will turn orange to alert you that there is a Check-In requiring your attention and the Alert count will be updated to include the Check-In.

To support date-driven environments, Check-In notifications will be sorted amongst messages in the **Alerts** tab. Alerts (messages and Check-Ins) will display within the **Alerts** tab of the Clinical App based on the following sort order:

1. Due date (past due to future due)
2. Message Severity (High, Medium, Low)
3. Received date



Check-In Notification Content and Actions

For simplicity, the content in a Check-In notification is the same in the **Alerts** and **Check-Ins** tabs within the Clinical App. In each Check-In notification, the Check-In's due date (in text and numerical form), as well as a corresponding visual indicator, and recurrence will display. Additionally, from within each Check-In notification, you will have the ability to access the Check-In's associated questionnaire and/or complete a Follow-Up action on the Check-In notification.

Viewing a Check-In Notification's Recurrence

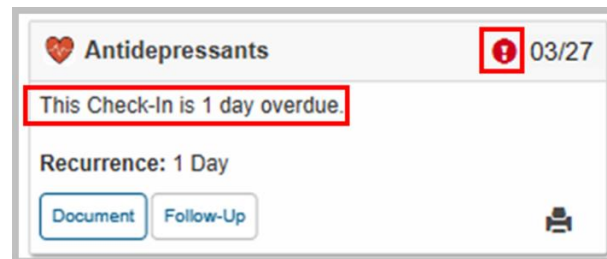
To assist you when modifying a Check-In's due date, the Check-In program's recurrence schedule will be displayed within each Check-In notification as a read-only **Recurrence** field.



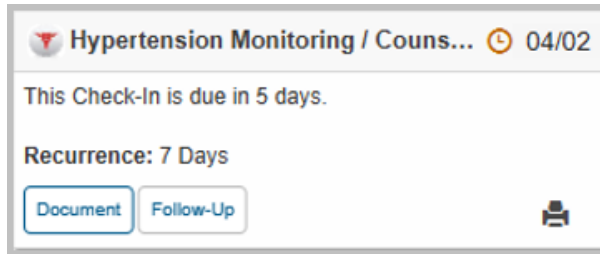
Note: When the facility level setting for a Check-In program's recurrence is different than the corporate setting for that program, the facility level setting will be used.

Viewing a Check-In Notification's Due Date Visual Indicator

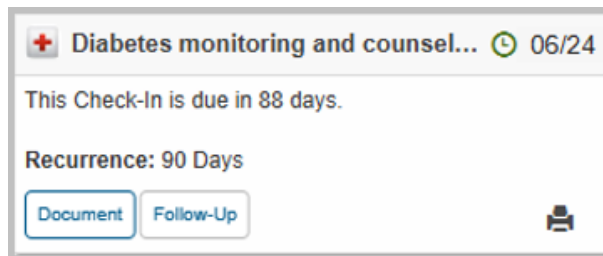
In order to quickly alert you of a Check-In notification's due date, a visual indicator will display. A red indicator will display when the Check-In is past due.



An orange indicator will display when the Check-In is due within the Check-In program's **Due Date Reminder** range.

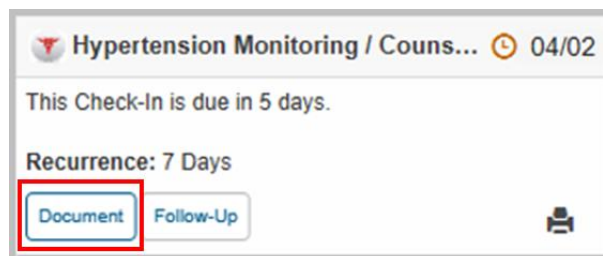


A green indicator will display when the Check-In is due in the future, outside of the Check-In program's **Due Date Reminder** range.



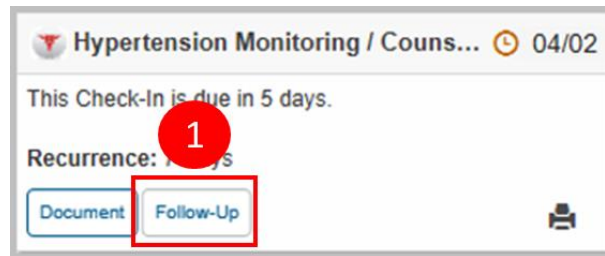
Accessing a Check-In Notification's Questionnaire

A Check-In notification's associated questionnaire can be accessed directly from a Check-In notification in the **Alerts** or **Check-Ins** tab within the Clinical App. Select the **Document** button within a Check-In notification to open the program's associated questionnaire.



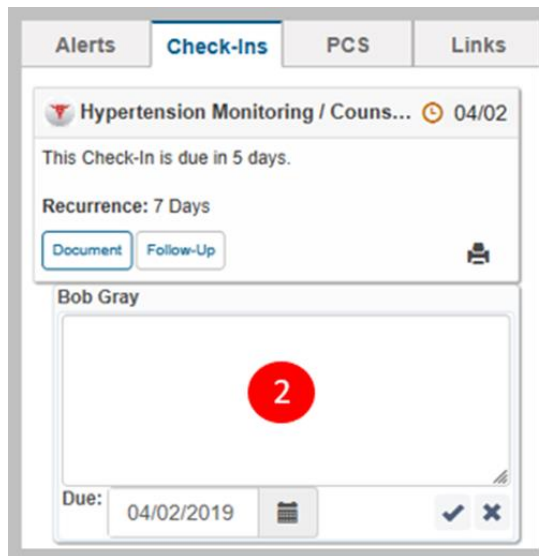
Adding a Follow-Up Comment and/or Due Date Change via the Check-In Notification

You can add an optional comment and/or select a one-time override of a Check-In notification's due date directly from the **Alerts** or **Check-Ins** tab by selecting the **Follow-Up** button within a Check-In notification.

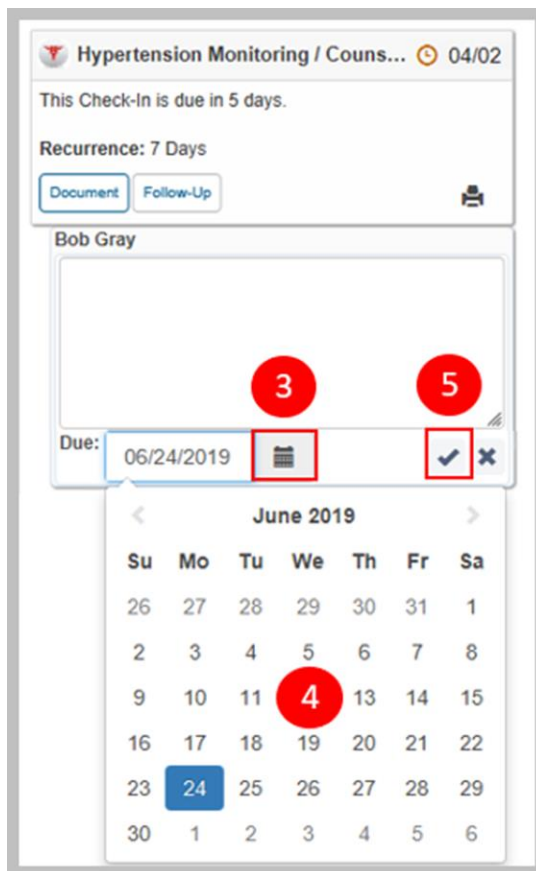


- 1) Select the **Follow-Up** button in the Check-In notification. The Follow-Up section will display with a comment text box that allows you to enter an optional comment.

Note: The comment text box will only display for Check-In programs with the **Support Follow-Up Comments in Check-In Notifications** checkbox selected.



- 2) Enter a comment in the text box.



- 3) Select the calendar icon (📅) in the **Due** field to change the Check-In notification's due date.

Note: A due date can be, at most, 999 days in the future. If you enter a due date beyond the 999 days maximum, the system will set the due date to the maximum date.

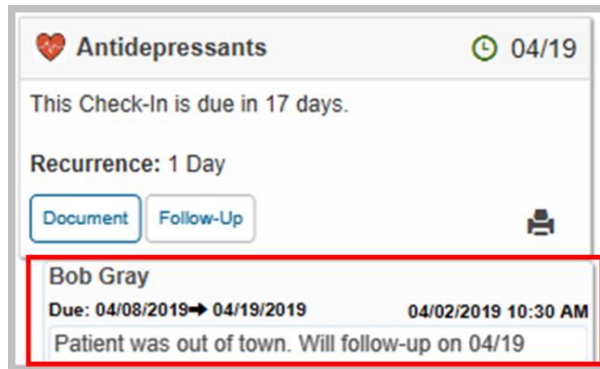
- 4) Use the pop-up calendar to change the Check-In notification's due date or enter the due date directly into the **Due** field in mm/dd/yyyy format.
- 5) Select the check mark icon (✓) to save your comment and/or due date change. After you save a due date change, the due date for the patient's next Check-In will be immediately updated to the selected date.

Note: You can discard your Follow-Up comment and/or due date change by selecting the "X" icon (✕) in the Follow-Up section.

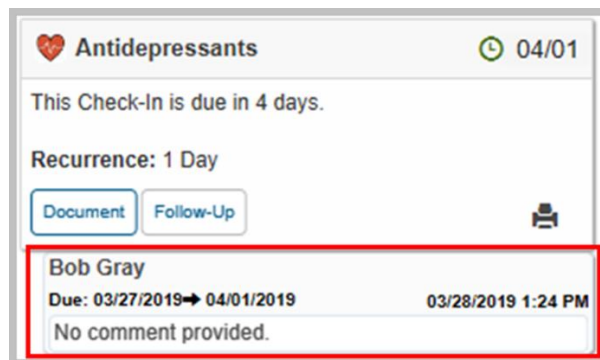
Viewing Follow-Up Comments and/or Due Date Changes for the Current Instance of a Check-In

After a Check-In notification's due date has been modified, the due date change will be reflected in the title bar of the related comment, as well as in the title bar of the

Check-In notification. The related comment can be viewed from either the Clinical App or from the Clinical Program Message Detail screen. Any comments relating to the current instance of the Check-In will display directly under the Check-In notification and will be collapsed by default. Each comment can be individually expanded by selecting the comment.

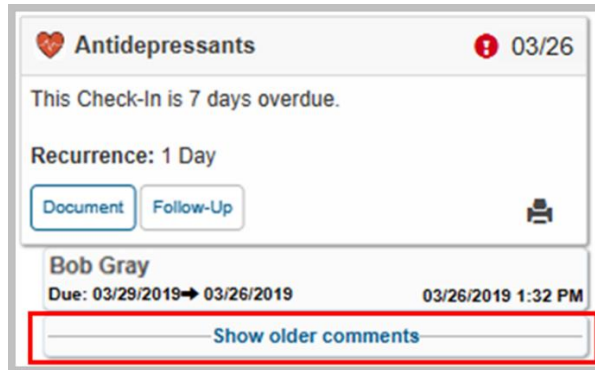


Note: If you do not provide a comment when modifying a Check-In notification's due date, a record of the due date change will be documented with the Check-In notification, along with a system-generated comment with the following text: "No comment provided."

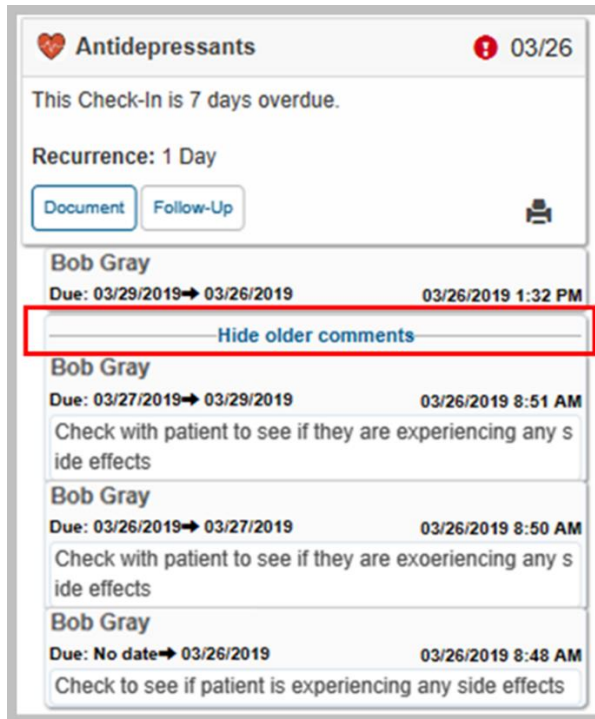


Viewing Follow-Up Comments and/or Due Date Changes for Previous Instances of a Check-In

You can view all comments and due date changes applied to a Check-In using the Clinical App **Alerts** or **Check-Ins** tab. When historical comments exist, a **Show older comments** line displays immediately under any comments relating to the current instance of the Check-In. Select the **Show older comments** line to view any comments relating to previous instances of the Check-In.



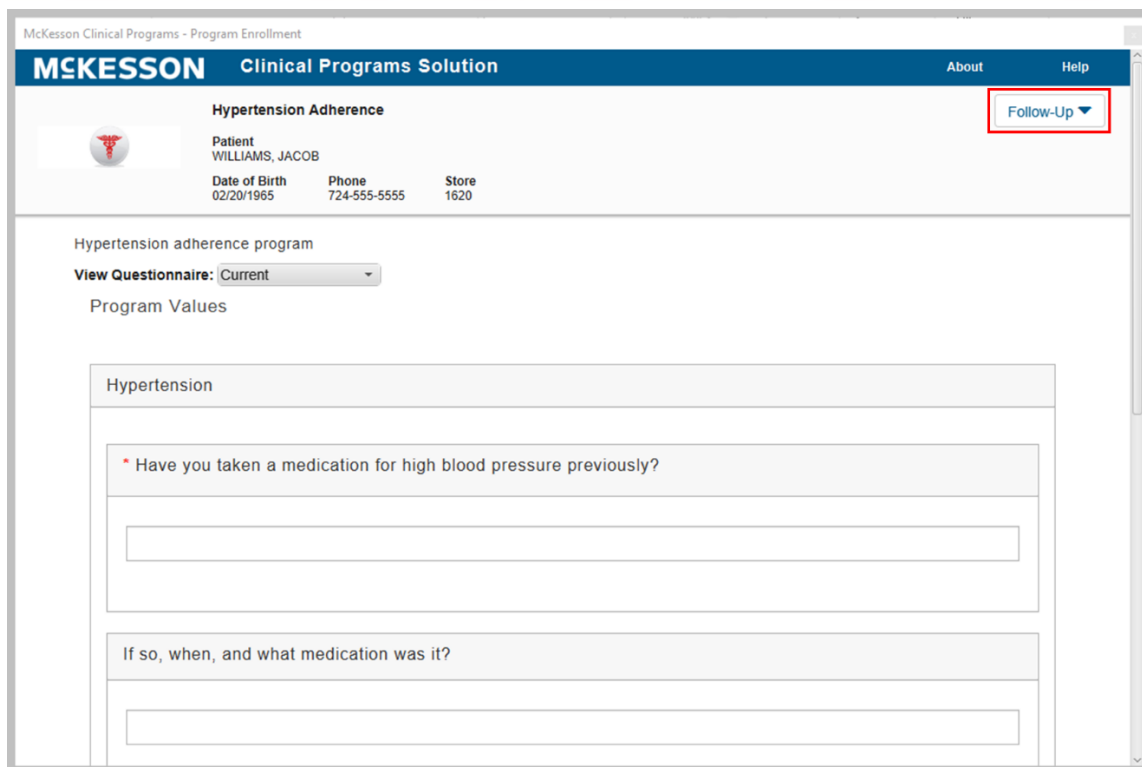
By default, historical comments are expanded. Historical comments can be individually collapsed by selecting the comment. Select the **Hide older comments** line to hide the historical comments from view.



Actions You Can Take in a Check-In Notification's Questionnaire

Adding a Follow-Up Comment and/or Due Date Change via the Questionnaire


In addition to completing the questionnaire, you can add an optional comment and/or select a one-time override of a Check-In notification's due date directly from the questionnaire.



McKesson Clinical Programs - Program Enrollment

MCKESSON Clinical Programs Solution About Help

Hypertension Adherence Follow-Up ▾

 Patient
WILLIAMS, JACOB

Date of Birth 02/20/1965 Phone 724-555-5555 Store 1620

Hypertension adherence program
View Questionnaire: Current ▾
Program Values

Hypertension

* Have you taken a medication for high blood pressure previously?

If so, when, and what medication was it?

- 1) Select the **Follow-Up** button in the questionnaire. The Follow-Up section will display with a comment text box that allows you to enter an optional comment.
Note: The comment text box will only display for Check-In programs with the **Support Follow-Up Comments in Check-In Notifications** checkbox selected.



MCKESSON Clinical Programs Solution About Help

Hypertension Adherence 2 Follow-Up ▲

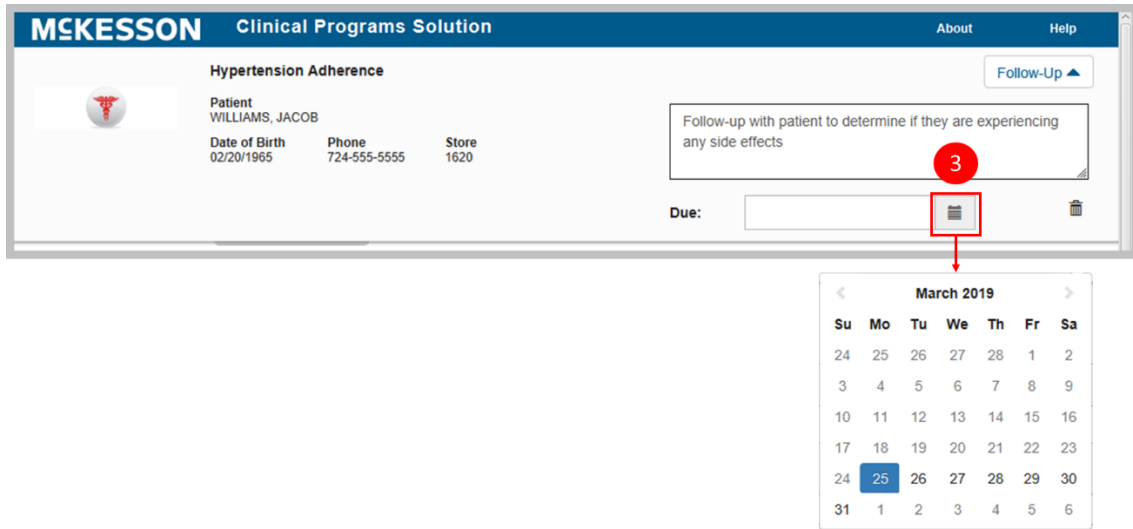
 Patient
WILLIAMS, JACOB


Date of Birth 02/20/1965 Phone 724-555-5555 Store 1620

Check with the patient to determine if they are experiencing any side effects


Due:  

- 2) Enter a comment in the text box.



- 3) Use the pop-up calendar to change the message's due date or enter the due date directly into the **Due** field in mm/dd/yyyy format. To use the pop-up, select the calendar icon () in the **Due** field to change the message's due date. When the calendar opens, it will display today's date, and enter that date into the **Due** field. Use the forward or back arrows (< or >) to move forward or backward in the calendar.


Note: A due date can be, at most, 999 days in the future. If you enter a due date beyond the 999 days maximum, the system will set the due date to the maximum date.

Note: You can discard a Follow-Up comment and/or due date change by selecting the trash can icon () in the Follow-Up section.

McKesson Clinical Programs - Program Enrollment

MCKESSON Clinical Programs Solution About Help

Hypertension Adherence Follow-Up ▲

 Patient
WILLIAMS, JACOB

Date of Birth: 02/20/1965 Phone: 724-555-5555 Store: 1620

Check with the patient to determine if they are experiencing any side effects

Due: 03/29/2019

Program Codes

Enter the appropriate Program Codes for this Patient.

Select	Code Type	Code	Description	Data
<input checked="" type="checkbox"/>	ICD-9	41.60	Primary Pulmonary Hypertension	Diovan 40mg
<input checked="" type="checkbox"/>	ICD-10	127.2	Other Secondary Pulmonary Hypertension	Vasotec 40mg tab

5

Resolve Save Progress

Note: The result of a Follow-Up comment and/or due date change will differ depending upon if you select the **Save Progress** or **Resolve** button in the questionnaire:

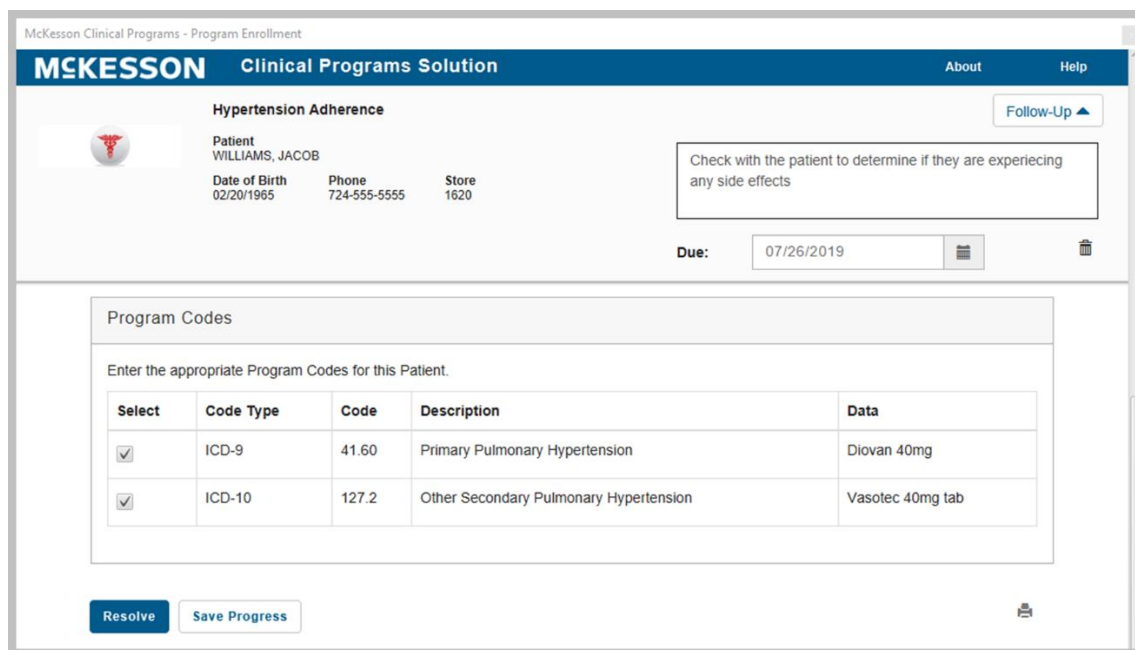
- When you select the **Save Progress** button, the questionnaire values will be saved to the CPS Patient Profile (if applicable), the **Document** button will be updated to an **In Progress** button, the Check-In's due date will not be reset, and your Follow-Up comment and/or due date change (if applicable) will be applied to the current instance of the patient's Check-In.
- When you select the **Resolve** button, the questionnaire values will be saved to the CPS Patient Profile (if applicable), the Check-In's due date will be reset using the Check-In program's **Recurrence** setting, and your Follow-Up comment and/or due date change (if applicable) will be applied to the next instance of the patient's Check-In.

Viewing Current and Resolved Check-In Questionnaires

In order to track a patient's clinical progress, you have the ability to view a patient's previously resolved questionnaires directly from the questionnaire window.

For more information on viewing previously resolved questionnaires, navigate to the [Viewing Current and Resolved Questionnaires](#) section.


Printing Check-In Questionnaires



McKesson Clinical Programs - Program Enrollment

MCKESSON Clinical Programs Solution About Help

Hypertension Adherence Follow-Up ▲

 Patient
WILLIAMS, JACOB

Date of Birth 02/20/1965 Phone 724-555-5555 Store 1620

Check with the patient to determine if they are experiencing any side effects

Due: 07/26/2019

Program Codes

Enter the appropriate Program Codes for this Patient.

Select	Code Type	Code	Description	Data
<input checked="" type="checkbox"/>	ICD-9	41.60	Primary Pulmonary Hypertension	Diovan 40mg
<input checked="" type="checkbox"/>	ICD-10	I27.2	Other Secondary Pulmonary Hypertension	Vasotec 40mg tab

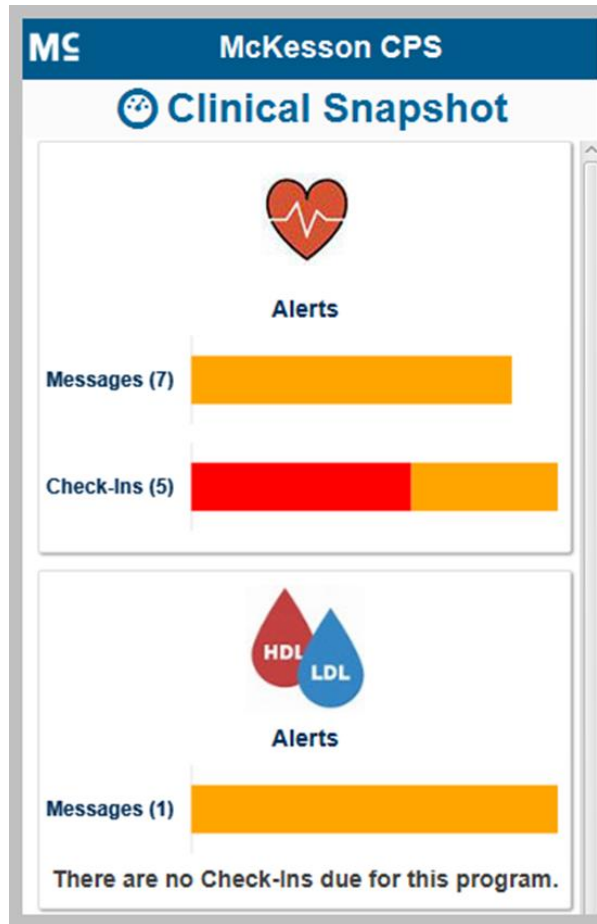
Resolve Save Progress

You can print questionnaires associated to Check-In notifications by selecting the print icon (🖨) within the questionnaire. Note that only one questionnaire can be printed at a time.

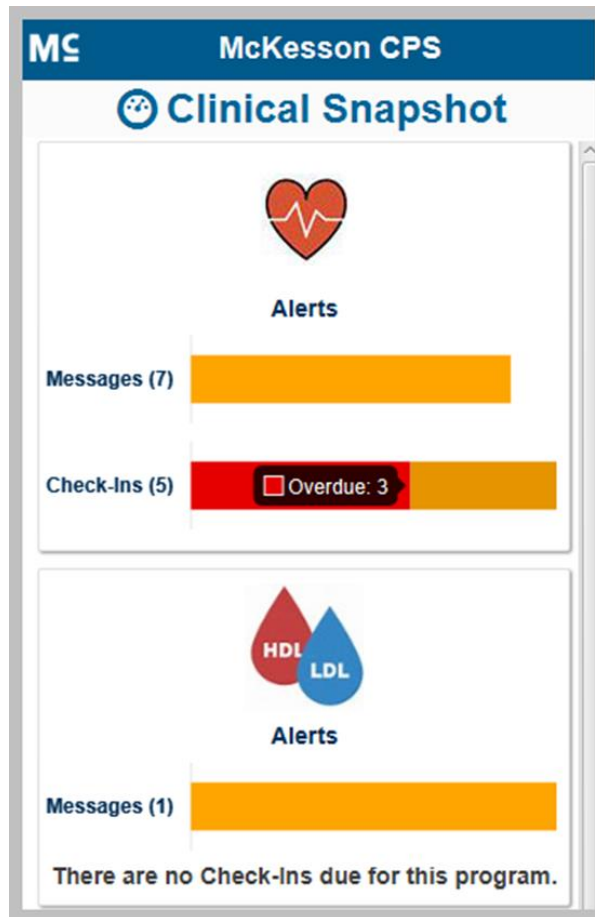
Note: Print functionality is available for EnterpriseRx users on version 9.1 or higher and Pharmserv users on version 7.5.0.3 or higher.

Clinical Snapshot

The Clinical Snapshot allows you to view past due and due Check-Ins without requiring a patient in context. When a Check-In program is enabled in the logged in facility, the program will display within the Clinical Snapshot, along with the corresponding message and Check-In counts.



To provide insight into a program’s overall status, Check-Ins with a due date in the past will display as red within the accompanying graph and, when the user hovers over the red section, the total count of past due Check-Ins will display.



Similarly, Check-Ins due within the configured **Due Date Reminder** range will display as orange within the accompanying graph and, when the user hovers over the orange section, the total count of Check-Ins due within the **Due Date Reminder** range will display.



MC
McKesson CPS

Clinical Snapshot

Alerts

Messages (7)

Check-Ins (5)
Due: 2

Alerts

Messages (1)


There are no Check-Ins due for this program.

Note: If a Check-In program's **Due Date Reminder** field is set to **<blank>**, then any Check-In notifications for that program with a defined due date will always display as orange within the accompanying graph and will always be included in the total count of Check-Ins due.


Accessing the Check-In Program-Level View

To view all past due and due Check-Ins for a specific program, select the program's Check-Ins count or accompanying graph in the Clinical Snapshot. The Check-In program-level view will display and be sorted first by due date (past due to future due), then alphabetically by Patient Name. A comment icon (🗨️) will also display if there is a comment and/or due date change associated with the current instance of the Check-In.

MC
McKesson CPS



Clinical Snapshot



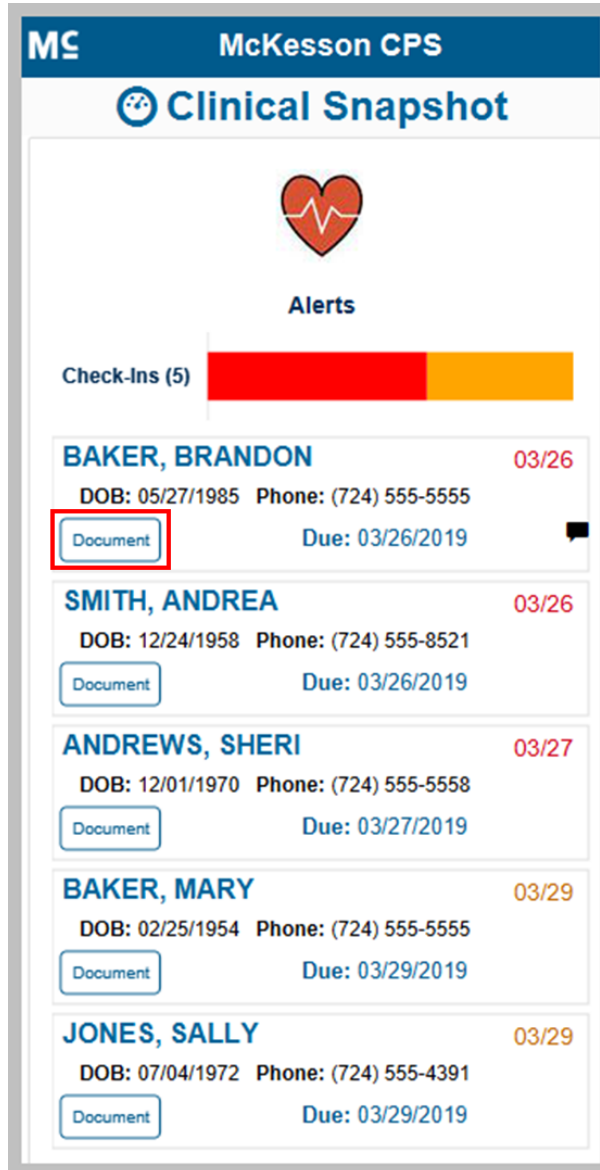
Alerts

Check-Ins (5)

<p>BAKER, BRANDON 03/26</p> <p>DOB: 05/27/1985 Phone: (724) 555-5555</p> <p>Document Due: 03/26/2019 ■</p>
<p>SMITH, ANDREA 03/26</p> <p>DOB: 12/24/1958 Phone: (724) 555-8521</p> <p>Document Due: 03/26/2019</p>
<p>ANDREWS, SHERI 03/27</p> <p>DOB: 12/01/1970 Phone: (724) 555-5558</p> <p>Document Due: 03/27/2019</p>
<p>BAKER, MARY 03/29</p> <p>DOB: 02/25/1954 Phone: (724) 555-5555</p> <p>Document Due: 03/29/2019</p>
<p>JONES, SALLY 03/29</p> <p>DOB: 07/04/1972 Phone: (724) 555-4391</p> <p>Document Due: 03/29/2019</p>

Note: At most, 50 Check-In notifications will display in the Check-In program-level view.

Accessing a Check-In Notification's Questionnaire in the Check-In Program-Level View



From the Check-In program-level view, you can access a Check-In notification's associated questionnaire via the **Document** button. Select the **Document** button to open the questionnaire.

Modifying a Check-In Notification's Due Date in the Check-In Program-Level View

You can modify a Check-In notification's due date via an inline editable **Due** field directly from the Check-In program-level view.

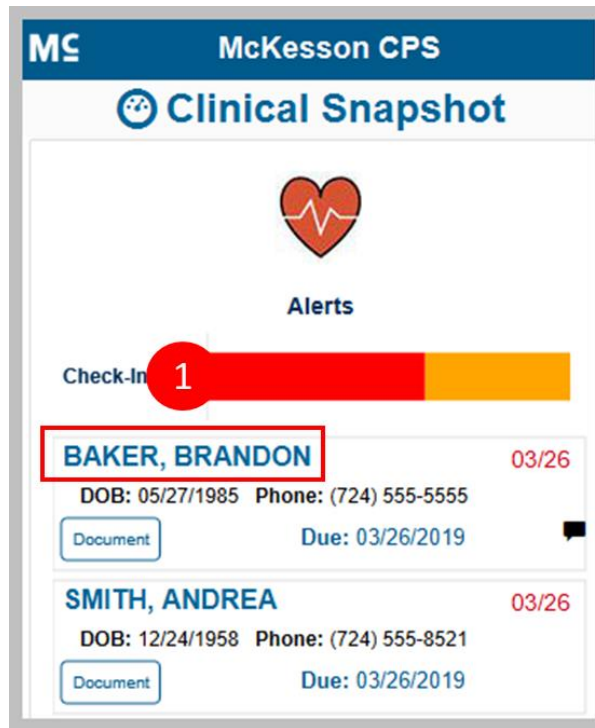
- 1) Select the calendar icon (📅) in the **Due** field to change the Check-In notification's due date.
Note: A due date can be, at most, 999 days in the future. If you enter a due date beyond the 999 days maximum, the system will set the due date to the maximum date.
- 2) Use the pop-up calendar to change the Check-In notification's due date or enter the due date directly into the **Due** field in mm/dd/yyyy format.
- 3) Select the check mark icon (✓) to save your due date change. After you save a due date change, the due date for the patient's next Check-In will be immediately updated to the selected date and the Check-In program-level view will be refreshed.

Note: You can discard your due date change by selecting the "X" icon (✕).

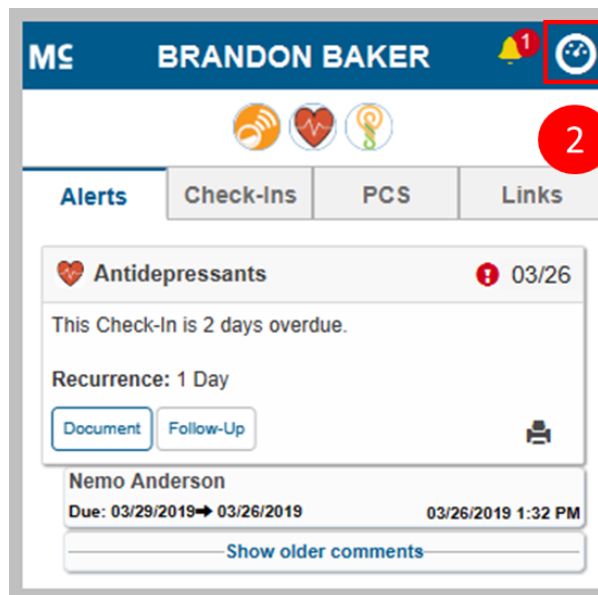
When a Check-In notification's due date is changed in the Check-In program-level view, a record of the due date change will be documented with the Check-In notification, along with a system-generated comment with the following text: "No comment provided." You can view the related comment on the **Alerts** or **Check-Ins** tab of the Clinical App.

Putting Patient into Context in the Check-In Program-Level View

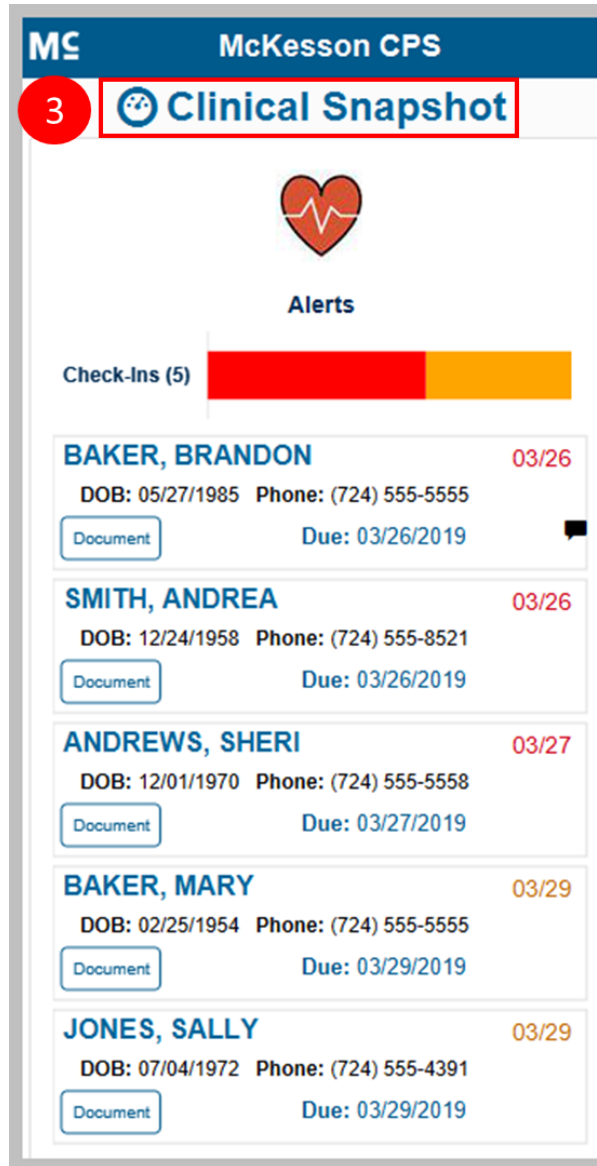
While viewing the Check-In program-level view, you can optionally put a patient into context within the Clinical App by selecting the patient's name.



- 1) Select a patient's name in the Check-In program-level view.



- 2) When you are finished reviewing the patient's Alerts, select the **Clinical Snapshot** icon (👁️) in the upper-right corner of the Clinical App to return to the Check-In program-level view.



McKesson CPS

3 Clinical Snapshot

Alerts

Check-Ins (5)

BAKER, BRANDON	03/26
DOB: 05/27/1985 Phone: (724) 555-5555	
Document	Due: 03/26/2019
SMITH, ANDREA	03/26
DOB: 12/24/1958 Phone: (724) 555-8521	
Document	Due: 03/26/2019
ANDREWS, SHERI	03/27
DOB: 12/01/1970 Phone: (724) 555-5558	
Document	Due: 03/27/2019
BAKER, MARY	03/29
DOB: 02/25/1954 Phone: (724) 555-5555	
Document	Due: 03/29/2019
JONES, SALLY	03/29
DOB: 07/04/1972 Phone: (724) 555-4391	
Document	Due: 03/29/2019

- 3) To return to the Clinical Snapshot's main page, select the Clinical Snapshot title bar in the Check-In program-level view.

For More Information

Visit the CPS Online Help by selecting **Help** for more information about setting Self-Directed Programs. The CPS User Guide is also accessible through McKesson.com (<http://www.mckesson.com/Pharmacies/Independent-Retail/Pharmacy-Management-Software-and-Services/CPS-User-Guide/>) or the McKesson Training Portal (<https://learning.mckesson.com>). For assistance getting access to vendor programs, contact your Account Executive/Account Manager.



CPS Vendor Programs

Connect With Your Vendor Programs

CPS enables integration of multiple certified third-party solutions for in-workflow intervention and messaging. CPS will alert you of vendor program enrollment opportunities, as well as opportunities identified by the vendor program. Additionally, CPS provides patient and prescription information to some vendor programs to help reduce duplicate data entry.

CPS is integrated with several vendor programs in different market categories, such as:

- Specialty Therapy Management
- Hypertension Management
- Medication Therapy Management
- Adherence
- Patient Communications
- Immunization
- Pharmacy eCare Plan Documentation

Configuring Patient Communications

Patient Communications (PCS) allows you to better communicate with your patients, through certified vendors that support communication methods (e-mail, text message, phone call, mobile application) and notify your patients with refill reminders, pick-up reminders, and more.

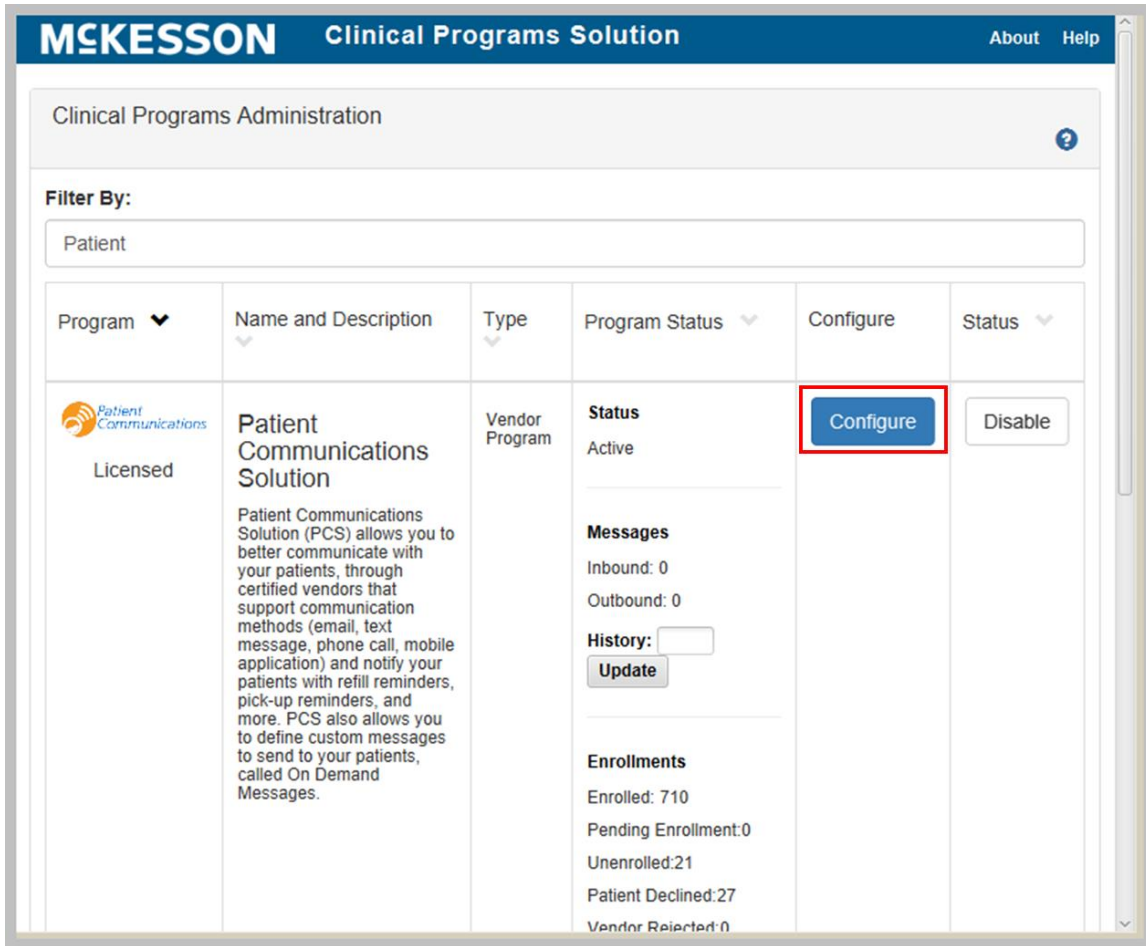
Note: PCS is only available for use with EnterpriseRx (version 7.0 and higher). Vendors are only available if certified.

Steps for Configuring Patient Communications


- [Getting Started with Patient Communications Program Configuration](#)
- [Setting Up Vendor Messages](#)
- [Changing a Vendor URL](#)
- [Setting Up Pick-Up and Refill Reminders](#)
- [Setting Up On Demand Messages](#)

- [Accessing On Demand Messages in the Clinical App](#)
- [Enrolling Patients in Patient Communications](#)

Getting Started with Patient Communications Program Configuration



The screenshot displays the 'Clinical Programs Administration' interface. At the top, there is a header with 'McKesson Clinical Programs Solution' and 'About Help' links. Below the header, a 'Filter By:' dropdown is set to 'Patient'. A table lists the available programs. The 'Patient Communications Solution' program is highlighted, and its 'Configure' button is circled in red. The table also shows the program's status as 'Active' and provides options to 'Configure' or 'Disable' it. Below the table, there are sections for 'Messages' (Inbound: 0, Outbound: 0), 'History' (with an 'Update' button), and 'Enrollments' (Enrolled: 710, Pending Enrollment: 0, Unenrolled: 21, Patient Declined: 27, Vendor Rejected: 0).

Program	Name and Description	Type	Program Status	Configure	Status
 Licensed	Patient Communications Solution Patient Communications Solution (PCS) allows you to better communicate with your patients, through certified vendors that support communication methods (email, text message, phone call, mobile application) and notify your patients with refill reminders, pick-up reminders, and more. PCS also allows you to define custom messages to send to your patients, called On Demand Messages.	Vendor Program	Status Active	Configure	Disable

To configure PCS, navigate to the CPS Program Admin screen and select the **Configure** button next to the PCS program.

McKESSON
Clinical Programs Solution
About Help

Configure Patient Communications(PCS)

Patient Enrollment

Add a Data Filter Rule to configure when an Enrollment Message will be shown

[Edit Data Filter](#)

Time Period Before Asking a Patient to Enroll Again

3 Months

Due Date Reminder

Days

Program Messages

Message	Data Filter	Due Date Reminder	Type	Severity

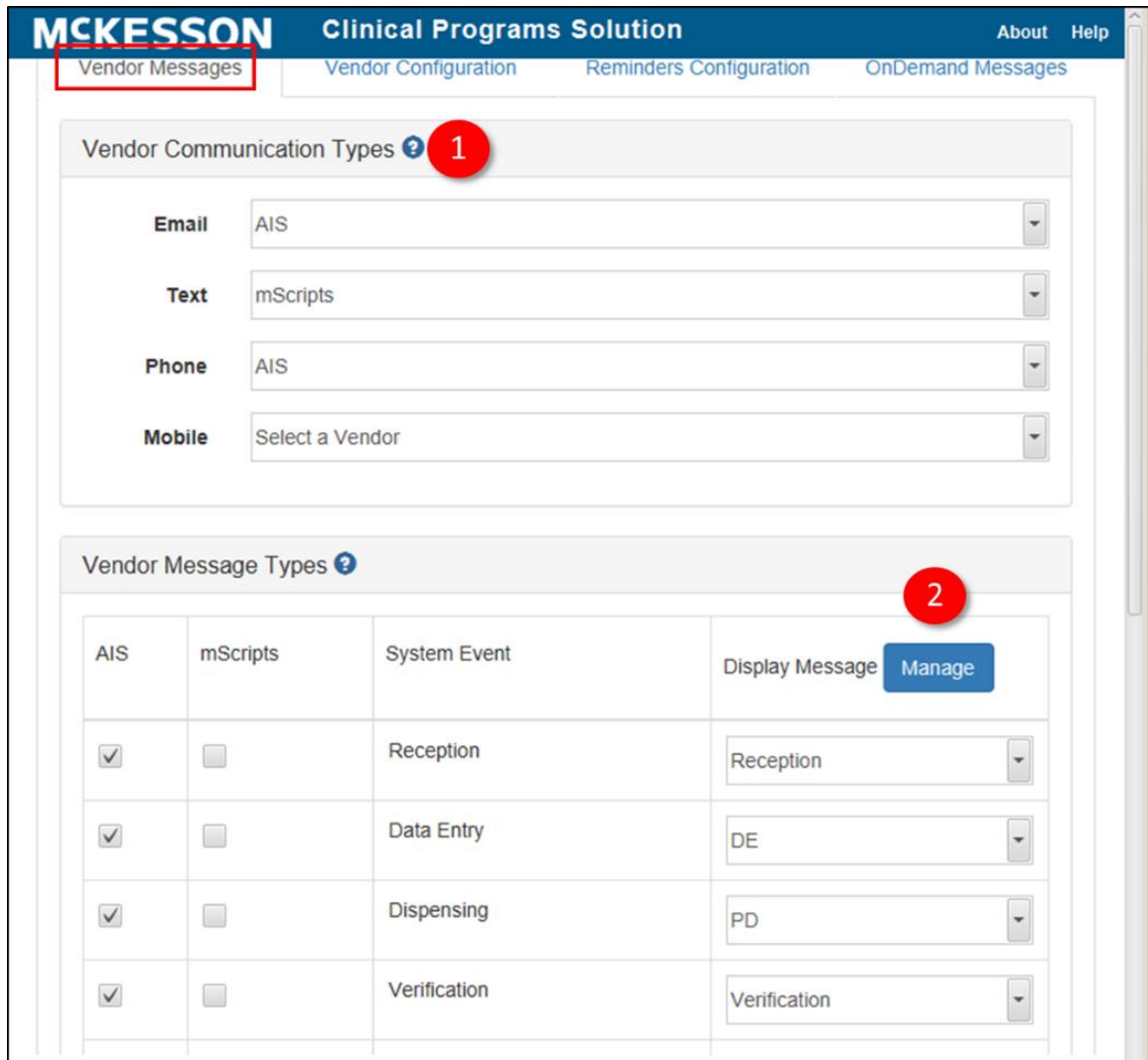
Program Specific Settings

[Program Settings](#)

On the configuration screen for the program, select the **Program Settings** button.
Note: The **Program Settings** button is only available when configuring PCS at the corporate root level.

Setting Up Vendor Messages

From the **Vendor Messages** tab, you can select the preferred vendor for each communication type (e-mail, text message, voicemail, and mobile application). You can also create and remove display messages and specify the vendor and display message you want to use for each system event. Display messages are user defined messages assigned to workflow system events in your Pharmacy Management System that are sent to the selected vendor(s) when an Rx passes the selected system event(s) (for example, data entry or product dispensing). The vendor(s), in turn, communicates these messages to the patient. **Note:** To use this functionality, you also need to set up basic data filters for enrollment messages. For more information, see [Setting up Data Filters for Program Enrollments](#).



Vendor Messages | Vendor Configuration | Reminders Configuration | OnDemand Messages

Vendor Communication Types 1

Email: AIS

Text: mScripts

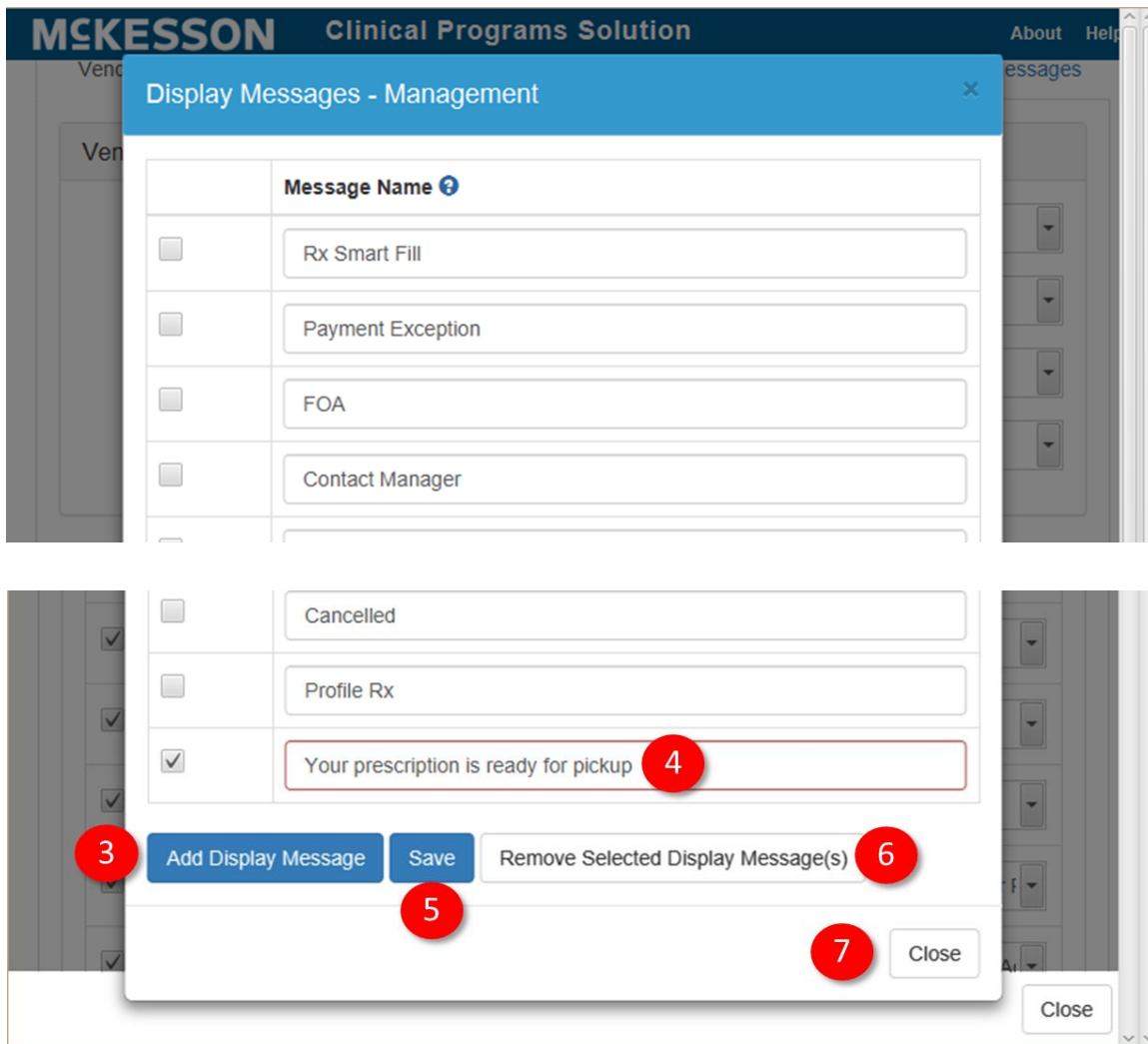
Phone: AIS

Mobile: Select a Vendor

Vendor Message Types 2

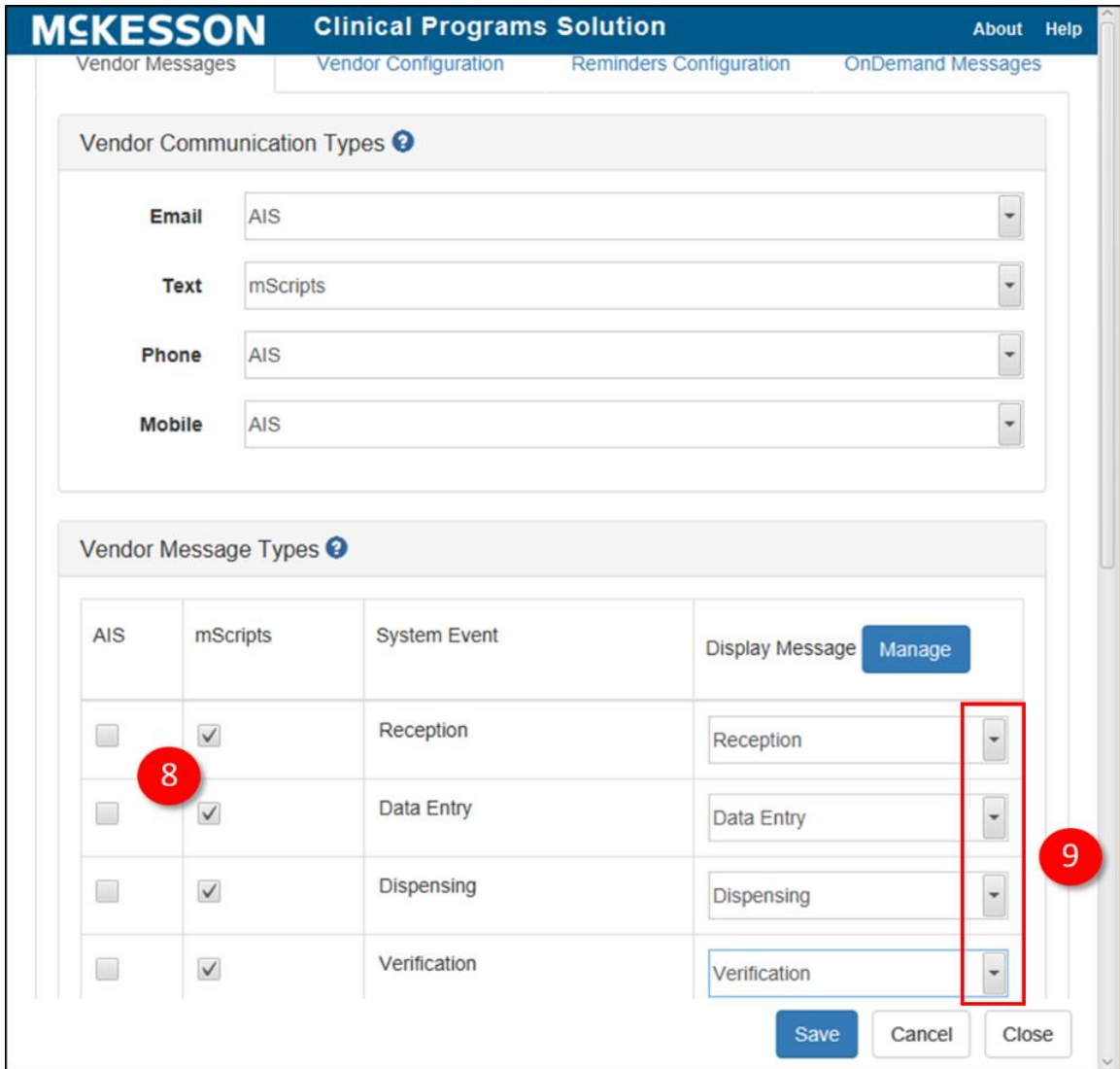
AIS	mScripts	System Event	Display Message	Manage
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Reception	Reception	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Data Entry	DE	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Dispensing	PD	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Verification	Verification	

- 1) In the **Vendor Communication Types** section, select the preferred vendor for each communication type from the drop-down menus. If you do not specify a vendor for a communication type, patients will not receive messages through that communication type. A vendor can be used for more than one communication type but only one vendor can be selected for each communication type. **Note:** As you make selections in the **Vendor Communication Types** section, the **Vendor Message Types** table updates to display a column for each vendor.
- 2) Select the **Manage** button to manage your display messages. The **Display Messages – Management** dialog appears.



- 3)** Scroll to the bottom of the list and select the **Add Display Message** button to add a new display message. A new row appears at the bottom of the display messages list.
- 4)** Enter your display message text in the **Message Name** field and check the box if you wish the message to be active.
- 5)** Select the **Save** button to add your new display message. You can continue adding additional display messages by repeating steps 3-5.
- 6)** To remove a display message(s), select the checkbox(es) for the display message(s) you want to remove, then select the **Remove Selected Display Message(s)** button. Note that you cannot remove a display message that is already mapped to a system event; you will need to remove this association before you can remove the display message. Removing a display message impacts all existing patients enrolled in your PCS program by deleting all patient preferences and records.

- 7) Select the **Close** button to save any changes and return to the **Vendor Messages** screen.



Vendor Communication Types

Email: AIS

Text: mScripts

Phone: AIS

Mobile: AIS

Vendor Message Types

AIS	mScripts	System Event	Display Message	Manage
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Reception	Reception	<input type="button" value="Manage"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data Entry	Data Entry	<input type="button" value="Manage"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dispensing	Dispensing	<input type="button" value="Manage"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Verification	Verification	<input type="button" value="Manage"/>

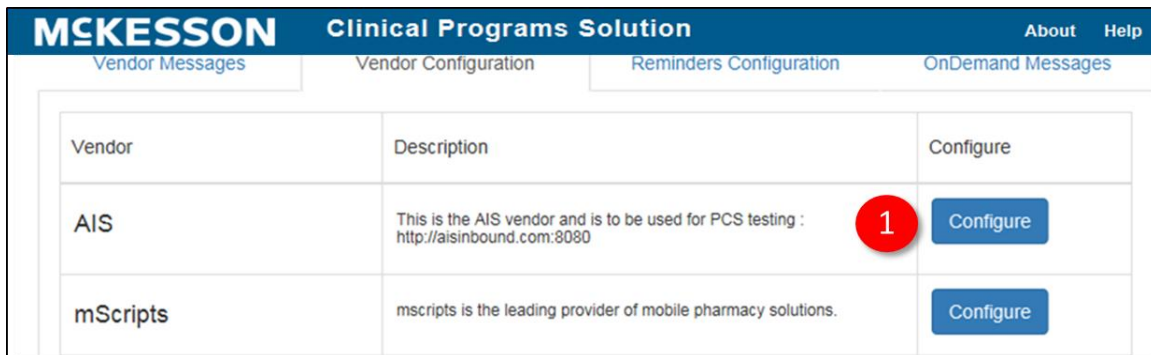
Save Cancel Close

- 8) Based on the selected vendor communication types, the **Vendor Message Types** table changes to display a column for each vendor. Use the checkboxes to set the desired vendor(s) for each system event where you want a display message to appear. Note that these system events are based on the workflow activities in your Pharmacy Management System.
- 9) Use the **Display Message** drop down to select the desired display message for each system event where you want a display message to appear.

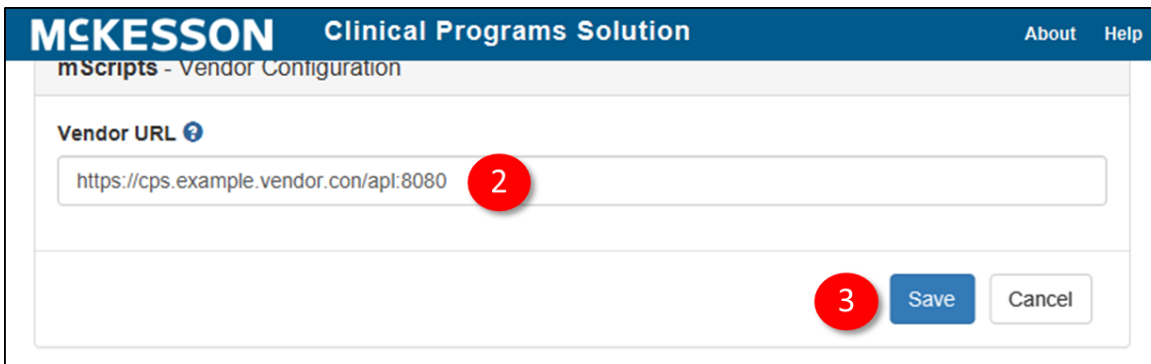
When you are done making edits on the **Vendor Messages** tab, select the **Save** button to save your changes.

Changing a Vendor URL

The **Vendor Configuration** tab displays the list of available vendors. From this screen, you can modify the vendor URL (the endpoint used to send messages to a vendor). **Note:** Changing the vendor URL overrides the vendor configuration that was created when the vendor was set up.



- 1) Select the **Configure** button next to the vendor you want to configure.



- 2) Modify the **Vendor URL** field.
- 3) Select the **Save** button to save your changes, or the **Cancel** button to return to the previous screen without saving any changes.

Setting Up Pick-Up and Refill Reminders

From the **Reminders Configuration** tab, you can set the auto-notification settings for pick-up reminders and refill reminders. Pick-up reminders are sent when a patient's order is past due for pick-up in the store, and refill reminders are sent to remind a patient that a refill is due.



McKESSON
About Help

Vendor Messages
Vendor Configuration
Reminders Configuration
OnDemand Messages

Pick-Up Reminder ? 1

When the patient's order is PAST DUE for Pick-Up in the store, have the Patient Communication Program Auto-Notify the patient with the settings below. Each field must contain a value to be saved correctly.

Auto-Notify the Patient the first time after:	<input style="width: 80%;" type="text" value="1"/>	days.
Repeat Auto-Notification every:	<input style="width: 80%;" type="text" value="1"/>	days after that.
Stop Auto-Notification after a total of:	<input style="width: 80%;" type="text" value="5"/>	days.

Refill Reminder ? 2

Before a Refill is due, have the Patient Communication Program Auto-Notify the patient with the settings below. Each field must contain a value to be saved correctly.

Auto-Notify the Patient:	<input style="width: 80%;" type="text" value="1"/>	days before the Refill is due.
Repeat Auto-Notification every:	<input style="width: 80%;" type="text" value="1"/>	days after that.
Stop Auto-Notification after a total of:	<input style="width: 80%; border: 2px solid blue;" type="text" value="5"/>	days.

3

1) In the **Pick-Up Reminder** section, define the following auto-notification settings for pick-up reminders:

- Auto-Notify the Patient the first time after (x) days.
- Repeat Auto-Notification every (x) days after that.
- Stop Auto-Notification after a total of (x) days.

Note: You must enter values in all three fields if you want to configure pick-up reminders. You cannot save your changes unless all three fields have been populated. If you do not enter any values in these fields, pick-up reminders are not configured and will not be sent to patients.

2) In the **Refill Reminder** section, define the following auto-notification settings for refill reminders:

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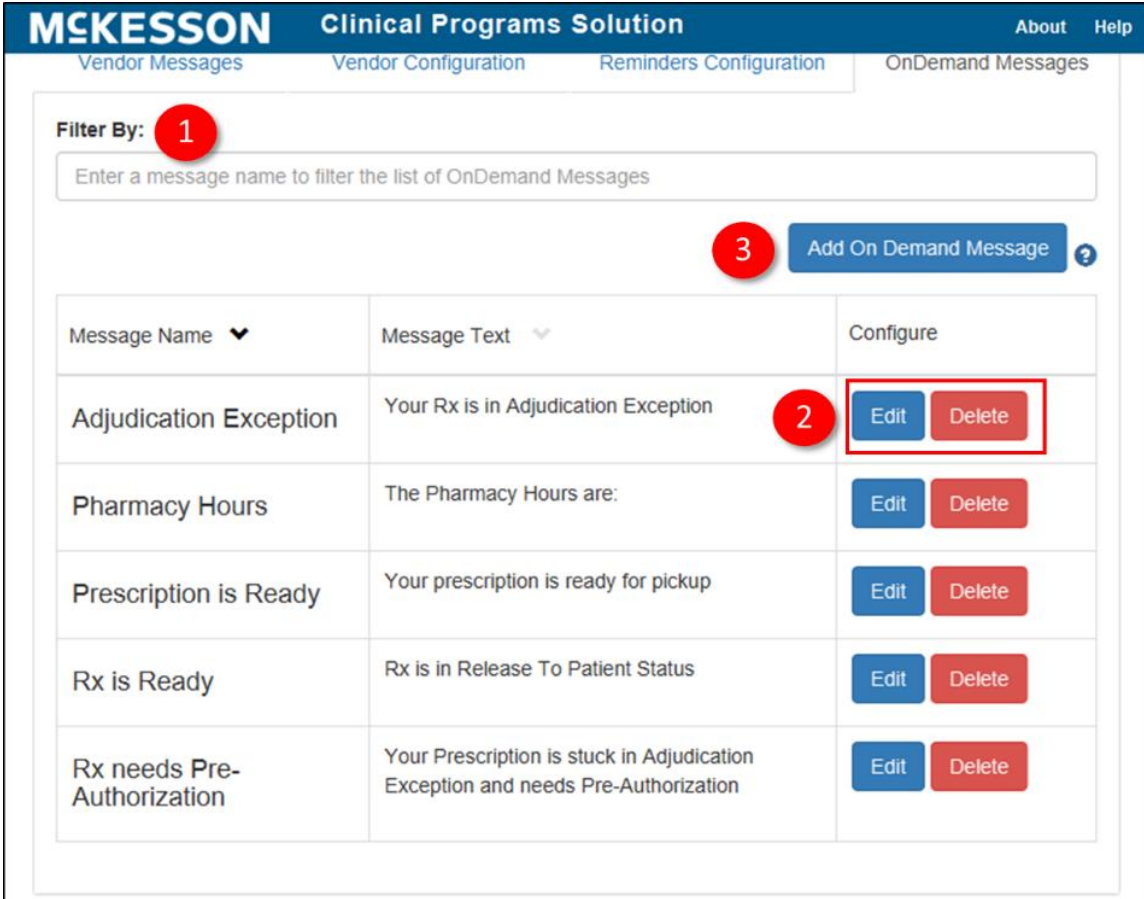
- Auto-Notify the Patient (x) days before the refill is due.
- Repeat Auto-Notification every (x) days after that.
- Stop Auto-Notification after a total of (x) days.

Note: You must enter values in all three fields if you want to configure refill reminders. You cannot save your changes unless all three fields have been populated. If you do not enter any values in these fields, refill reminders are not configured and will not be sent to patients.

- 3) Select the **Save** button to save your changes. If you do not want to save your changes, select the **Cancel** button to discard your changes.

Setting Up On Demand Messages

PCS also allows you to define custom messages to send to your patients, called On Demand Messages. From the **On Demand Messages** tab, you can add, edit, and delete On Demand Messages.

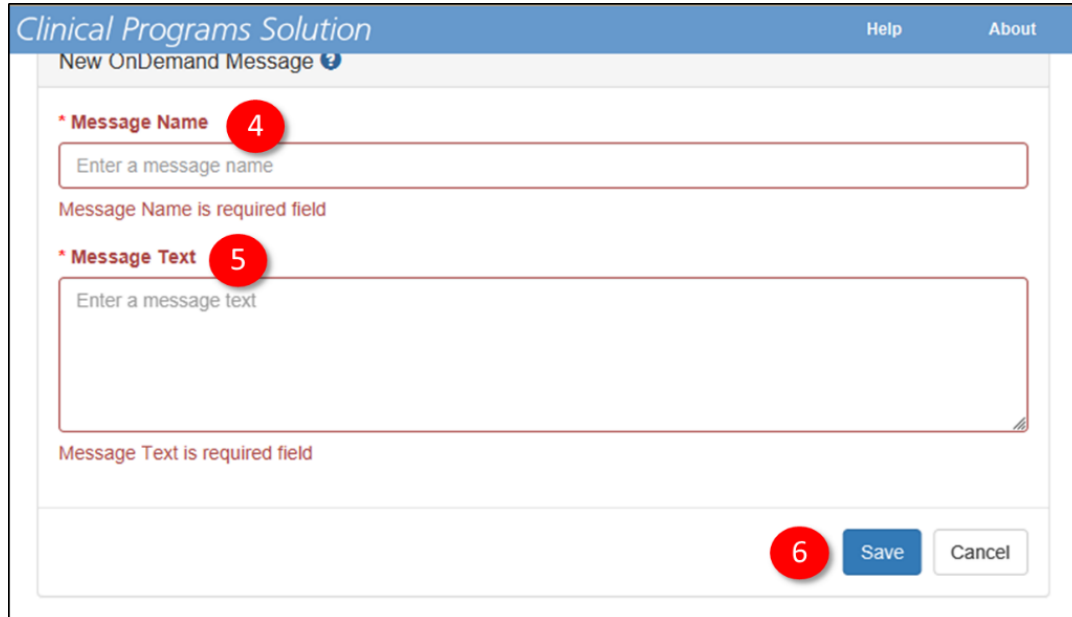


The screenshot shows the 'OnDemand Messages' configuration page. At the top, there is a navigation bar with 'McKesson Clinical Programs Solution' and tabs for 'Vendor Messages', 'Vendor Configuration', 'Reminders Configuration', and 'OnDemand Messages'. Below the navigation bar, there is a 'Filter By:' field with a red circle '1' next to it, containing a text input field. To the right of the input field is a blue button labeled 'Add On Demand Message' with a red circle '3' next to it. Below the input field is a table with three columns: 'Message Name', 'Message Text', and 'Configure'. The table contains five rows of messages. The first row, 'Adjudication Exception', has its 'Edit' and 'Delete' buttons highlighted with a red box and a red circle '2'. The other rows also have 'Edit' and 'Delete' buttons.

Message Name	Message Text	Configure
Adjudication Exception	Your Rx is in Adjudication Exception	Edit Delete
Pharmacy Hours	The Pharmacy Hours are:	Edit Delete
Prescription is Ready	Your prescription is ready for pickup	Edit Delete
Rx is Ready	Rx is in Release To Patient Status	Edit Delete
Rx needs Pre-Authorization	Your Prescription is stuck in Adjudication Exception and needs Pre-Authorization	Edit Delete

- 1) To filter the list of existing On Demand Messages, enter a message name in the **Filter By** field.

- 2) Use the **Edit** and **Delete** buttons to edit or delete an existing On Demand Message. Selecting the **Edit** button opens the **Edit On Demand Message** screen (similar to the New On Demand Message screen, shown below) where you can edit the **Message Name** and **Message Text** for the selected On Demand Message.
- 3) To add a new message, select the **Add On Demand Message** button to open the New On Demand Message screen.

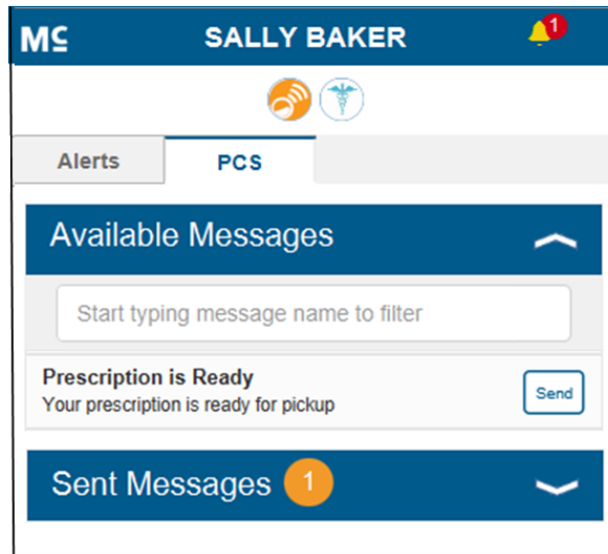


- 4) Enter a message name in the **Message Name** field.
- 5) Enter appropriate text in the **Message Text** field. This is the text of the message that will display when it is sent.
- 6) Select the **Save** button to save your new On Demand Message. You can also select the **Cancel** button to return to the previous screen without saving the message.

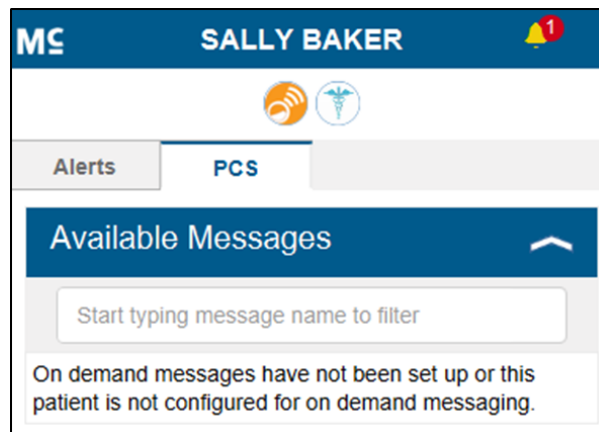
Accessing On Demand Messages in the Clinical App

When the patient in context is enrolled in PCS, you will see a **PCS** tab in the Clinical App. You can use this tab to easily access PCS On Demand messaging.

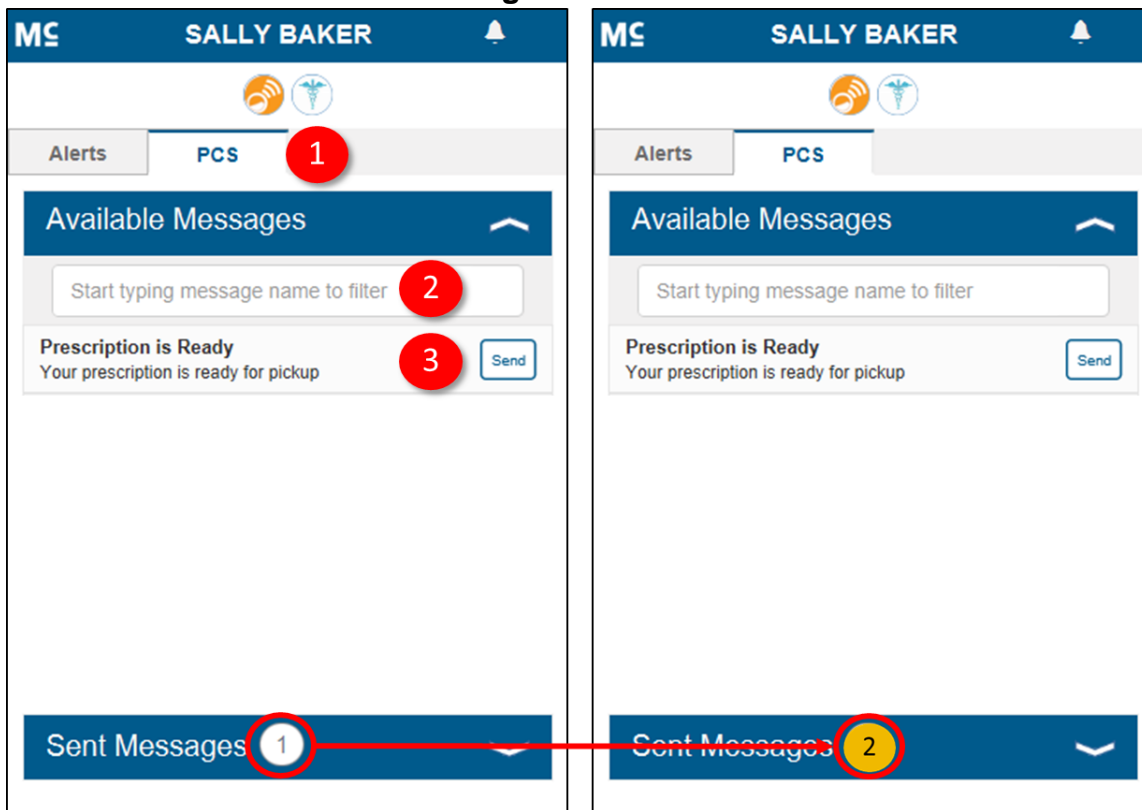
The **PCS** tab includes an **Available Messages** section and a **Sent Messages** section. By default, the **Available Messages** section will be expanded and will include all PCS On Demand messages configured for the logged in facility.



Note: If the facility does not currently support On Demand Messaging, or the patient in context is not configured for On Demand Messaging, then the following message displays under the Available Messages section: “On demand messages have not been set up or this patient is not configured for on demand messaging.”

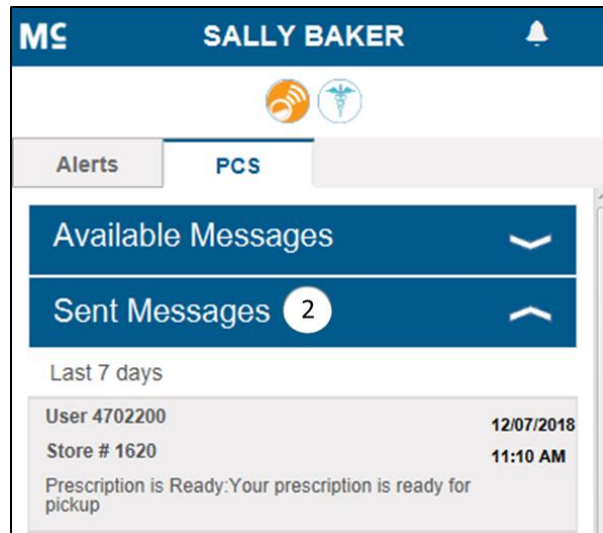


To send a PCS On Demand message:



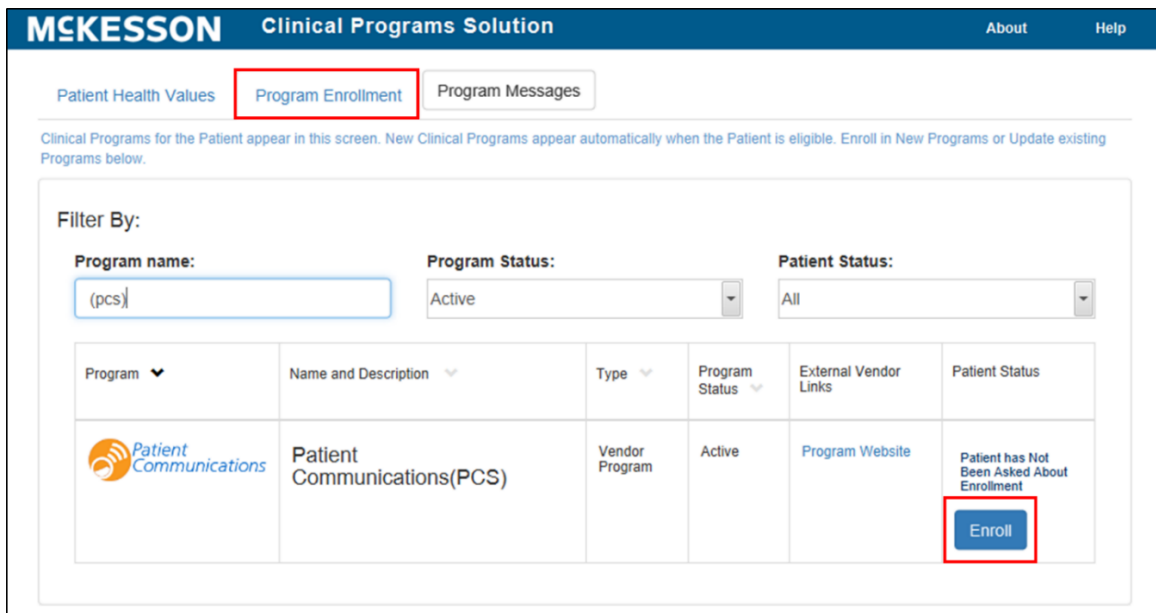
- 1) Open the Clinical App and select the **PCS** tab. For more information on the Clinical App, see [Receiving Messages in the Clinical App](#).
- 2) Begin typing the desired message to filter the **Available Messages** list if needed.
- 3) Select the message from the list. You will see the message text and a **Send** button. Select the **Send** button to send the selected message to the patient in context.
- 4) To notify you that the message was successfully sent, the numerical count in the **Sent Messages** header will highlight orange and update to include the recently sent message. The numerical count in the **Sent Messages** header will remain orange until the Sent Messages section is expanded.

Note: The **Sent Messages** section includes 7 days of historical PCS On Demand messages for the patient in context. Historical PCS On Demand messages will sort newest to oldest, with any messages sent while the patient is in context highlighted in gray (as shown below). Each historical PCS On Demand message will display the user, timestamp, store number, and text associated with the message. For convenience, a numerical count of sent messages displays within the **Sent Messages** header.



Enrolling Patients in Patient Communications

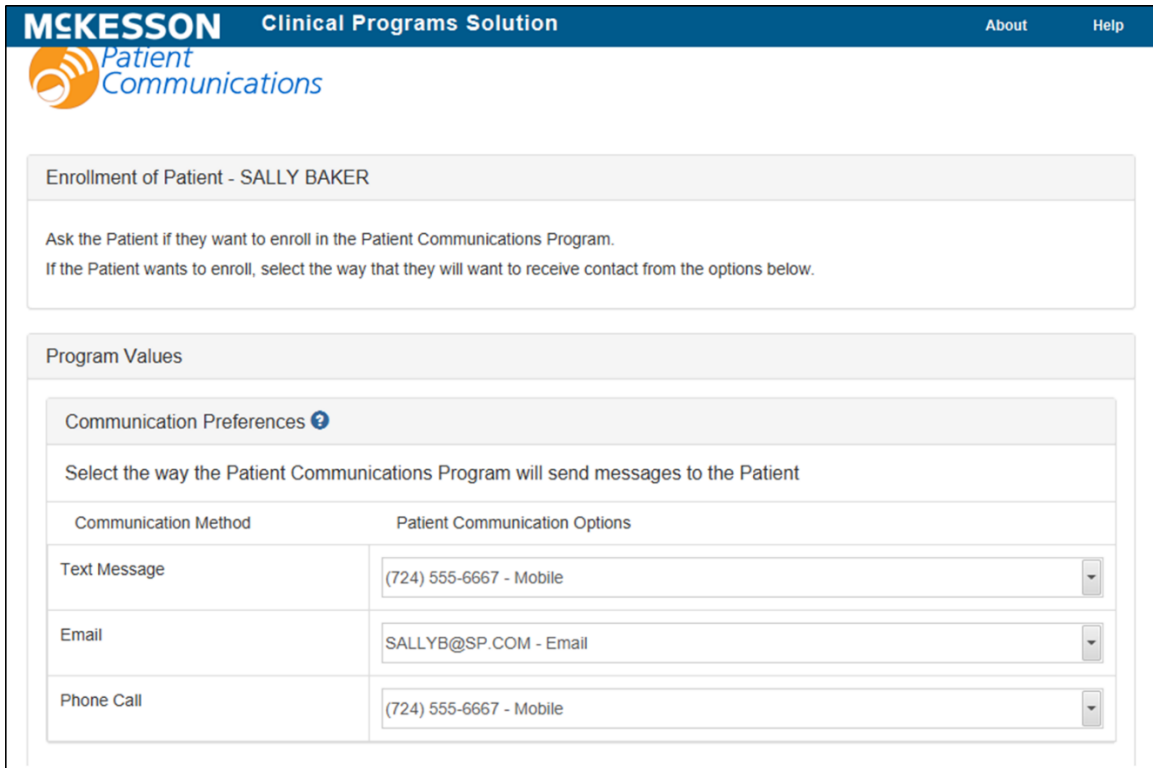
Patients are enrolled in PCS programs the same way they are enrolled in other CPS vendor programs, through an enrollment message or the **Program Enrollment** tab in the CPS Patient Profile. For more information on viewing and editing program enrollments in CPS, see [Viewing and Editing Program Enrollments](#).



When enrolling in PCS using the CPS Patient Profile, users can navigate to the **Program Enrollment** tab and select the **Enroll** button next to the PCS program to open the PCS enrollment screen.

Note: You can also access the PCS enrollment screen through the Clinical App or Task Queue by selecting the **Enroll** button on a PCS enrollment message. For more

information on enrolling patients in CPS programs through the Clinical App, see [Enrolling Patients](#).



McKESSEON Clinical Programs Solution About Help

Patient Communications

Enrollment of Patient - SALLY BAKER

Ask the Patient if they want to enroll in the Patient Communications Program.
If the Patient wants to enroll, select the way that they will want to receive contact from the options below.

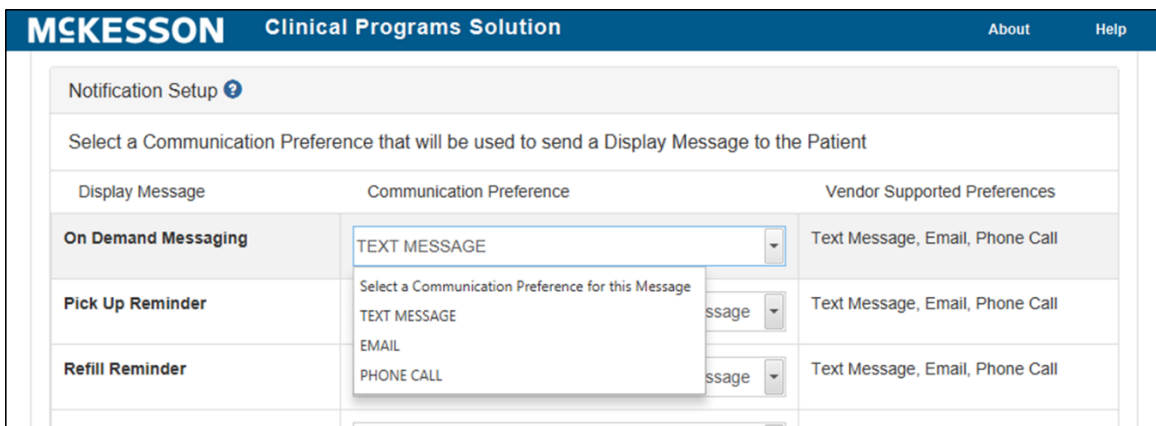
Program Values

Communication Preferences ?

Select the way the Patient Communications Program will send messages to the Patient

Communication Method	Patient Communication Options
Text Message	(724) 555-6667 - Mobile
Email	SALLYB@SP.COM - Email
Phone Call	(724) 555-6667 - Mobile

The top section of the screen, **Communication Preferences**, allows you to select a patient's preferred phone number for text messages and phone calls (this can be the same phone number for both or different phone numbers) and their preferred e-mail address for e-mail messages using the **Patient Communication Options** drop down menus for each communication method.



McKESSEON Clinical Programs Solution About Help

Notification Setup ?

Select a Communication Preference that will be used to send a Display Message to the Patient

Display Message	Communication Preference	Vendor Supported Preferences
On Demand Messaging	TEXT MESSAGE	Text Message, Email, Phone Call
Pick Up Reminder	TEXT MESSAGE	Text Message, Email, Phone Call
Refill Reminder	PHONE CALL	Text Message, Email, Phone Call

The bottom portion of the screen, **Notification Setup**, allows you to select the preferred communication method for On Demand Messaging, Pick Up Reminders,

Refill Reminders, and any additional display messages you have configured using the **Communication Preference** drop down menus.

Note: If you do not have any additional display messages configured, this list will just display **On Demand Messaging**, **Pick Up Reminder**, and **Refill Reminder**.

The **Vendor Supported Preferences** column displays the communication methods supported by the vendor for each display message.

When you are done making any updates, select the **Save** button to save your changes, or the **Cancel** button to discard your changes and close the enrollment screen.

After enrolling a patient in PCS, note that the **Enroll** button on the **Program Enrollment** tab changes to **Unenroll** and a **Configure** button appears.



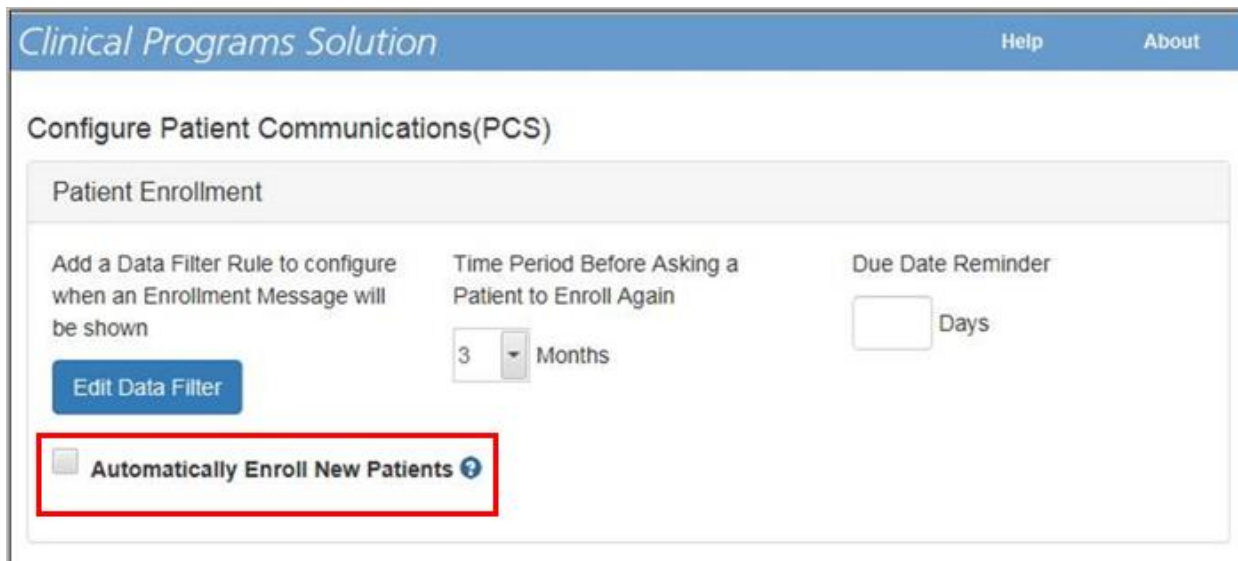
Selecting the **Configure** button allows you to edit the communication preferences and notification settings you defined for this patient. Selecting the **Unenroll** button will unenroll the patient from the program. **Note:** When you unenroll a patient, no PCS program preferences or records are retained for the patient.

Vendor Program Automatic Enrollment

In addition to manual program enrollment, CPS provides the option to automatically enroll new patients into select vendor programs.

Note: New patient automatic enrollment is only available for patient profiles created via the Add Patient functionality within EnterpriseRx (version 9.0 and higher).

When a vendor supports new patient automatic enrollment, the **Automatically Enroll New Patients** checkbox will display in the **Patient Enrollment** section within the CPS Program Admin screen.



The screenshot shows the 'Configure Patient Communications(PCS)' interface. At the top, there is a blue header with 'Clinical Programs Solution', 'Help', and 'About'. Below the header, the main content area is titled 'Configure Patient Communications(PCS)'. Underneath, there is a section titled 'Patient Enrollment'. This section contains three main areas: 'Add a Data Filter Rule to configure when an Enrollment Message will be shown' with an 'Edit Data Filter' button; 'Time Period Before Asking a Patient to Enroll Again' with a dropdown menu set to '3 Months'; and 'Due Date Reminder' with an input field for 'Days'. At the bottom of this section, there is a checkbox labeled 'Automatically Enroll New Patients' with a question mark icon, which is highlighted by a red rectangular box.

Note: The **Automatically Enroll New Patients** checkbox will be available at a Corporate Root or facility level and will be unselected by default.

When the **Automatically Enroll New Patients** checkbox is selected for an enabled vendor program in the logged in facility, immediately after a new EnterpriseRx patient profile is successfully saved, the patient will be automatically enrolled in the vendor program.

When a patient is automatically enrolled in PCS, the patient's PCS Communication Preferences will be systematically set using the information provided in the EnterpriseRx patient profile:

- When a **Phone** number is provided in the EnterpriseRx patient profile, the **Phone Call** PCS Communication Preference will be set to the EnterpriseRx **Phone** number.
- When a **Cell** number is provided in the EnterpriseRx patient profile, the **Text Message** PCS Communication Preference will be set to the EnterpriseRx **Cell** number.
- When a primary **Email** address is provided in the EnterpriseRx patient profile, the **Email** PCS Communication Preference will be set to the EnterpriseRx primary **Email** address.

Note: PCS is only available for use with EnterpriseRx (version 7.0 and higher). Vendors are only available if certified.

CPS and APS Integration

McKesson's Adherence Performance Solution

McKesson's Adherence Performance Solution (APS) includes an interactive dashboard that provides information on patient adherence for Cholesterol, Diabetes, and Hypertension, as well as information on gap therapy for diabetic patients without a statin and elderly patients on high risk medications. CPS works with APS to bring real-time data on patient medication adherence for these three disease states into pharmacy workflow.

APS is modeled after the CMS (Centers for Medicare and Medicaid Services) Star Ratings calculations. By individual pharmacy and/or pharmacy chain, APS identifies non-adherent patients using the list of medications, including generic equivalents, published by CMS for the disease states being measured. APS uses data directly from your pharmacy management system to calculate each patient's PDC (Proportion of Days Covered) to measure their adherence. A patient's PDC is calculated by dividing the number of refills within a measurement window by the number of days in the measurement window. For example, if a patient is on diabetes treatment, the number of refills the patient receives over a 12-month period is reviewed. If a patient refills a prescription with a 30-day supply 9 times within 12 months, they have 270 days of 365 days covered. The proportion of days covered is found by dividing 270 by 365, which gives 0.74 or 74%. Similar to CMS, APS uses the criteria that 80% PDC and above is considered adherent.

APS supports three types of adherence measurements using PDC scores:

- Cholesterol
- Diabetes

- Hypertension

In addition, APS identifies elderly patients (60 or older) using high risk medications (HRM), as well as diabetic patients not on a statin (Statin Use in Persons with Diabetes, or SUPD). The APS score for HRM is either a 0, for patients who received two or more Rx fills for the same HRM, or a 1, for patients who received no or less than two fills of the same HRM. SUPD applies to patients between 40 and 75 years old as of the last day of the measurement window. This measure applies to patients on diabetic medications with at least one statin fill during the measurement window. The SUPD score is either a 1 (adherent; the patient filled a statin in the measurement window) or a 0 (non-adherent; the patient did not fill a statin in the measurement window).

The patient data APS receives from your pharmacy management system is rolled up to the individual pharmacy level to determine the percentage of adherent patients for that pharmacy. APS calculates the percentage of adherent patients per pharmacy and assigns a 1-5 adherence rating following the scales published by CMS.

With APS, your pharmacy can identify non-adherent patients and the number of patients needed to improve your pharmacy's rating. Once patients are identified, you can leverage both APS and McKesson's Clinical Programs Solution to target and intervene with non-adherent patients.

APS Integration with CPS

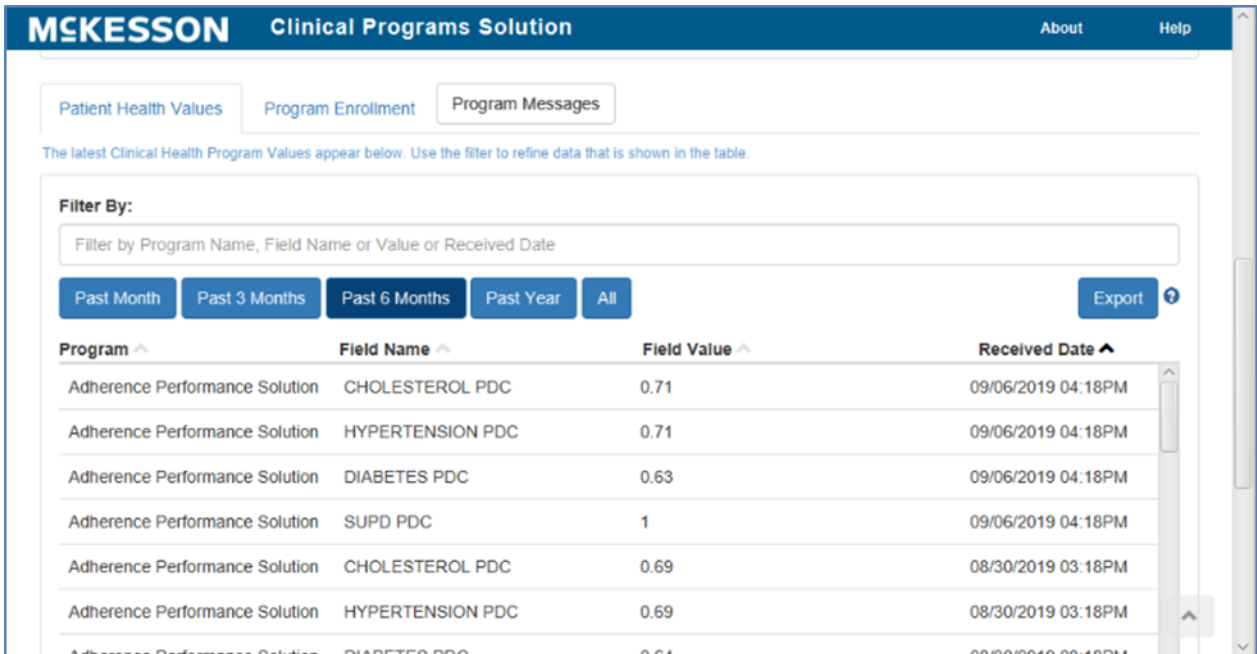
The integration of APS with CPS provides "real-time" data on patient adherence within pharmacy workflow. On a weekly basis, APS messages are created in CPS to alert pharmacy staff of non-adherent patients. APS messages in CPS will be available in the CPS Clinical App when the patient is in context, as well as in the CPS Task Queue outside of prescription processing.

Types of APS Messages in CPS

There are two types of APS messages available in CPS: Key-value pair messages and patient adherence trend messages.

Note: In order to leverage APS messages in CPS, you first need to enable the **Adherence Performance Solution** program within CPS. From CPS Program Admin, enter **Adherence Performance Solution** in the **Filter By** field. Once the program displays in the list, select the **Enable** button.

Key-value pair messages containing adherence measures are created on a weekly basis for all measured patients. You can view a patient's adherence measures using the **Patient Health Values** tab within the CPS Patient Profile.



The screenshot shows the McKesson Clinical Programs Solution interface. At the top, there are navigation tabs for "Patient Health Values", "Program Enrollment", and "Program Messages". Below these is a filter section with a text input field for "Filter by Program Name, Field Name or Value or Received Date" and buttons for "Past Month", "Past 3 Months", "Past 6 Months", "Past Year", and "All". An "Export" button is also present. The main content is a table with the following data:

Program ^	Field Name ^	Field Value ^	Received Date ^
Adherence Performance Solution	CHOLESTEROL PDC	0.71	09/06/2019 04:18PM
Adherence Performance Solution	HYPERTENSION PDC	0.71	09/06/2019 04:18PM
Adherence Performance Solution	DIABETES PDC	0.63	09/06/2019 04:18PM
Adherence Performance Solution	SUPD PDC	1	09/06/2019 04:18PM
Adherence Performance Solution	CHOLESTEROL PDC	0.69	08/30/2019 03:18PM
Adherence Performance Solution	HYPERTENSION PDC	0.69	08/30/2019 03:18PM
Adherence Performance Solution	DIABETES PDC	0.64	08/30/2019 03:18PM

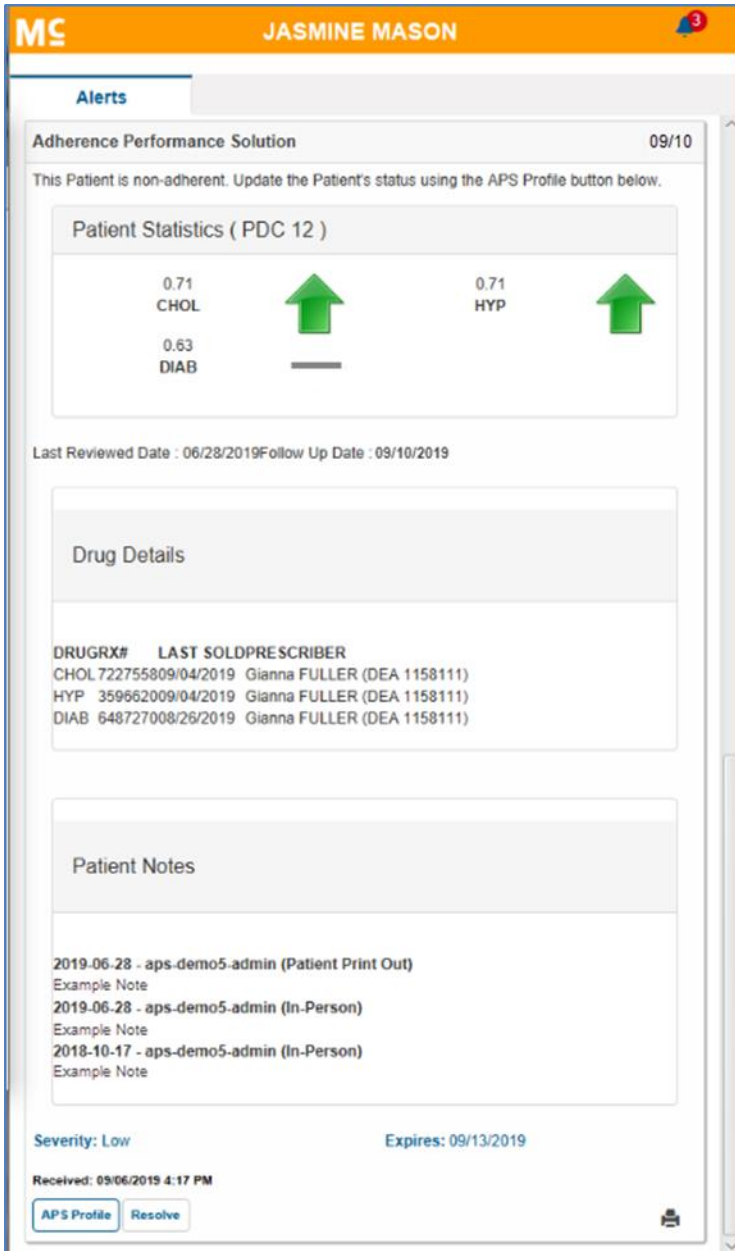
APS patient adherence trend messages contain patient adherence details and are created each week for patients meeting the below criteria:

- The patient has a PDC score between 50% (.50) and 80% (.80) for Cholesterol, Diabetes, and/or Hypertension.
- The patient is 60 years of age or older and is on a high-risk medication (HRM score of 0).
- The patient is between 40 and 75 years of age, is diabetic, and has not had a statin fill within the measurement window (SUPD score of 0).

Note: Criteria for patient adherence trend messages is customizable. For more information on customizing APS messages in CPS, please contact your Account Manager or Account Executive.

Viewing APS Messages in the CPS Clinical App

APS patient adherence trend messages will display within the CPS Clinical App when a non-adherent patient is in context within the pharmacy management system.






MC JASMINE MASON 3

Alerts

Adherence Performance Solution 09/10

This Patient is non-adherent. Update the Patient's status using the APS Profile button below.

Patient Statistics (PDC 12)

0.71		0.71	
CHOL		HYP	
0.63			
DIAB			

Last Reviewed Date : 06/28/2019 Follow Up Date : 09/10/2019

Drug Details


DRUGRX# LAST SOLDPRESCRIBER
 CHOL 722755809/04/2019 Gianna FULLER (DEA 1158111)
 HYP 359662009/04/2019 Gianna FULLER (DEA 1158111)
 DIAB 648727008/26/2019 Gianna FULLER (DEA 1158111)

Patient Notes

2019-06-28 - aps-demo5-admin (Patient Print Out)
 Example Note
 2019-06-28 - aps-demo5-admin (In-Person)
 Example Note
 2018-10-17 - aps-demo5-admin (In-Person)
 Example Note

Severity: Low Expires: 09/13/2019

Received: 09/06/2019 4:17 PM



The following information is included in patient adherence trend messages:

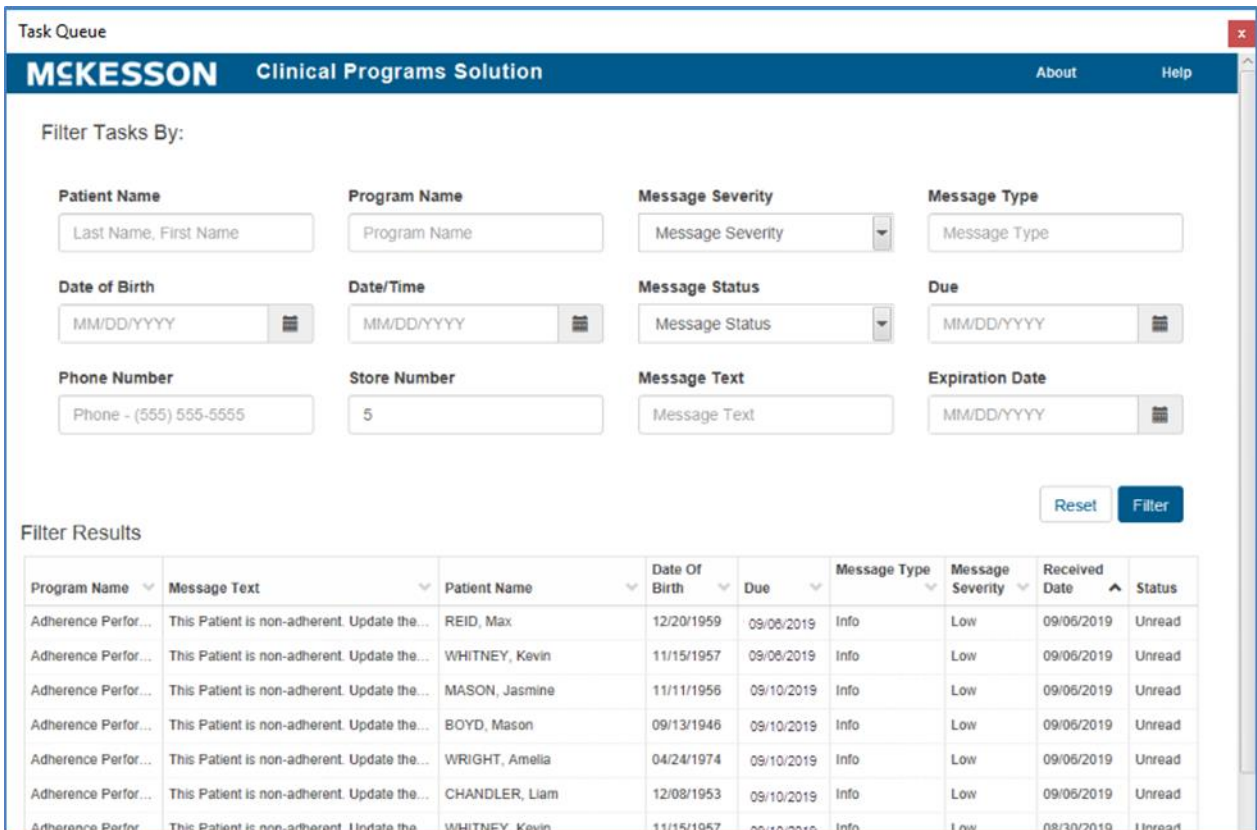
- The patient's 12-month adherence score for each disease state. Disease states will only display within the message if the patient has a non-adherent score. These scores translate to percentages (so, for example, 0.76 is the same as 76%).
- A visual indicator to show how the patient is trending from their last measured PDC score. If an up arrow displays next to a disease state, then the patient's PDC score has improved since the previous month. Likewise, if a down arrow displays, then the patient's PDC score has declined since the previous month.

If a flat line displays, then the patient's PDC score is the same as it was in the previous month.

- The APS Follow Up Date so that pharmacy staff knows when to check back in with the patient.
- The APS Last Reviewed Date so pharmacy staff knows when the patient was last contacted for their adherence.
- Drug details for the patient to assist with researching patient adherence.
- Patient Notes that exist in APS for the patient.
- Access to the APS Patient Profile via the **APS Profile** button. For more information on accessing the APS Patient Profile, refer to the section on [Opening the APS Patient Profile via a CPS Message](#).

Viewing APS Messages in the CPS Task Queue

Another option to view APS patient adherence trend messages is to use the CPS Task Queue. The CPS Task Queue will provide insight into all APS messages across all of your patients.



Task Queue

McKesson Clinical Programs Solution About Help

Filter Tasks By:

Patient Name: Last Name, First Name
 Program Name: Program Name
 Message Severity: Message Severity
 Message Type: Message Type

Date of Birth: MM/DD/YYYY
 Date/Time: MM/DD/YYYY
 Message Status: Message Status
 Due: MM/DD/YYYY

Phone Number: Phone - (555) 555-5555
 Store Number: 5
 Message Text: Message Text
 Expiration Date: MM/DD/YYYY

Reset Filter

Filter Results

Program Name	Message Text	Patient Name	Date Of Birth	Due	Message Type	Message Severity	Received Date	Status
Adherence Perfor...	This Patient is non-adherent. Update the...	REID, Max	12/20/1959	09/06/2019	Info	Low	09/06/2019	Unread
Adherence Perfor...	This Patient is non-adherent. Update the...	WHITNEY, Kevin	11/15/1957	09/06/2019	Info	Low	09/06/2019	Unread
Adherence Perfor...	This Patient is non-adherent. Update the...	MASON, Jasmine	11/11/1956	09/10/2019	Info	Low	09/06/2019	Unread
Adherence Perfor...	This Patient is non-adherent. Update the...	BOYD, Mason	09/13/1946	09/10/2019	Info	Low	09/06/2019	Unread
Adherence Perfor...	This Patient is non-adherent. Update the...	WRIGHT, Amelia	04/24/1974	09/10/2019	Info	Low	09/06/2019	Unread
Adherence Perfor...	This Patient is non-adherent. Update the...	CHANDLER, Liam	12/08/1953	09/10/2019	Info	Low	09/06/2019	Unread
Adherence Perfor...	This Patient is non-adherent. Update the...	WHITNEY, Kevin	11/15/1957	09/10/2019	Info	Low	09/06/2019	Unread

To view additional information for a specific APS message, select the row within the CPS Task Queue to open the **Clinical Program Message Detail** screen. The message content displayed within the **Clinical Program Message Detail** screen is

the same content that displays in the message when viewed using the CPS Clinical App.

McKESSEON
About Help

Clinical Program Message Detail


Adherence Performance Solution

Patient Name: MASON, Jasmine
 Date of Birth: 11/11/1956
 Phone Number: 205-589-7589
 Store Number: 5

Adherence Performance Solution

This Patient is non-adherent. Update the Patient's status using the APS Profile button below.

Patient Statistics (PDC 12)

0.71 CHOL		0.71 HYP
0.63 DIAB	—	

Last Reviewed Date : 06/28/2019
Follow Up Date : 09/10/2019

Drug Details

DRUG	RX#	LAST SOLD	PRESCRIBER
CHOL	7227558	09/04/2019	Gianna FULLER (DEA 1158111)
HYP	3596620	09/04/2019	Gianna FULLER (DEA 1158111)
DIAB	6487270	08/26/2019	Gianna FULLER (DEA 1158111)

Patient Notes

2019-06-28 - aps-demo5-admin (Patient Print Out)
Example note

2019-06-28 - aps-demo5-admin (In-Person)
Example note

2018-10-17 - aps-demo5-admin (In-Person)
Example note

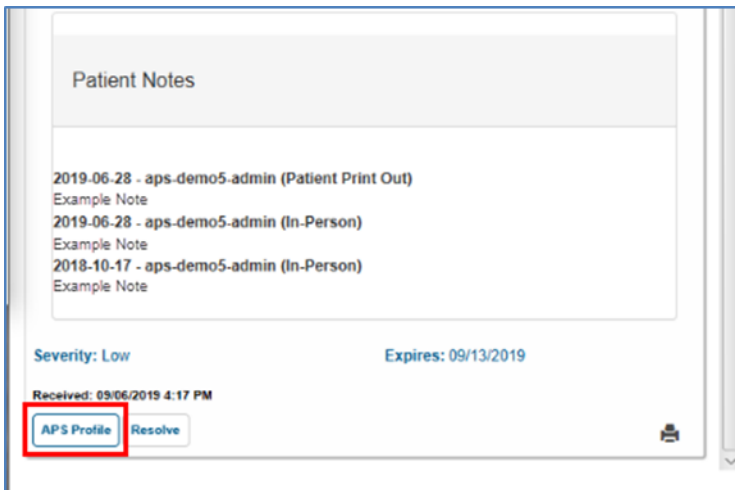
Received: 09/05/2019 4:17 PM Due: 09/10/2019 Severity: Low Expires: 09/13/2019

APS Profile
Resolve
...

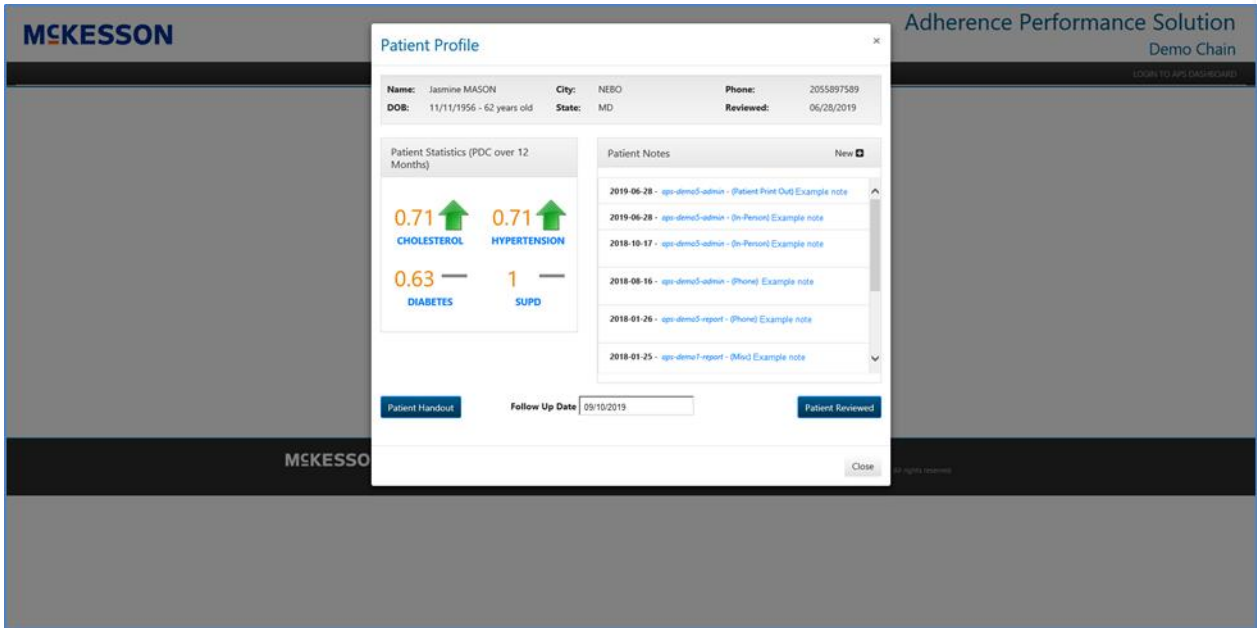
Opening the APS Patient Profile via a CPS Message

The APS Patient Profile provides additional adherence information on a patient. For this reason, you can easily open the APS Patient Profile directly from an APS patient adherence trend message in CPS.

To launch the APS Patient Profile, first open the APS patient adherence trend message using either the CPS Clinical App or Task Queue. Next, select the **APS Profile** button within the message.

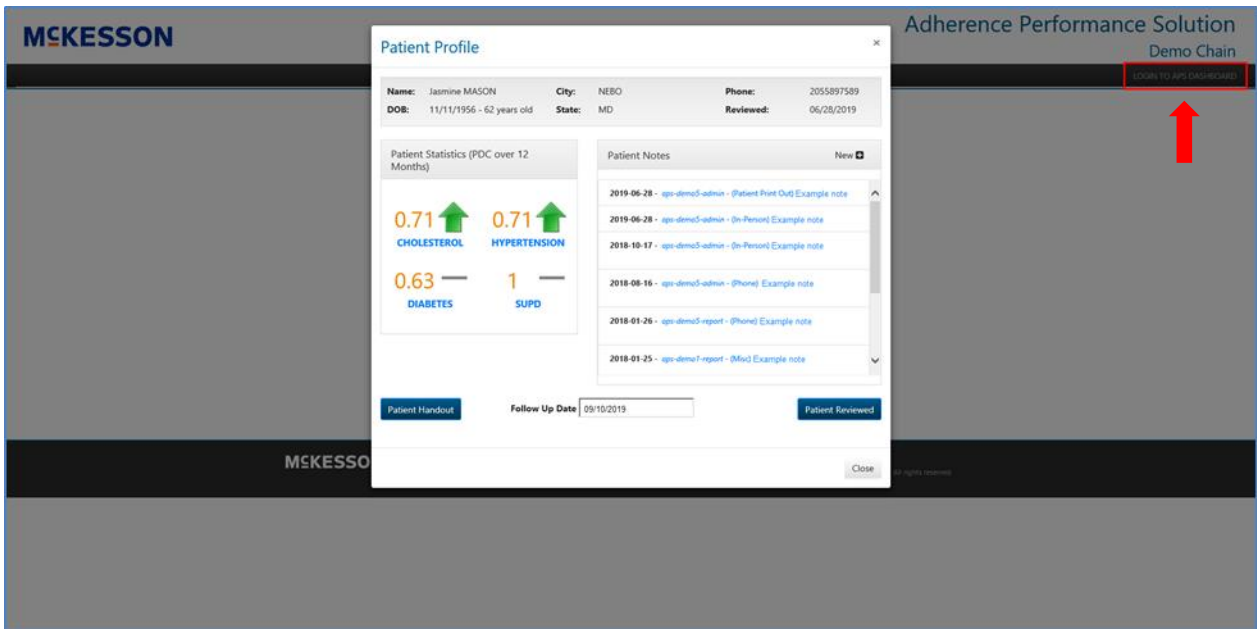


Selecting the **APS Profile** button will initiate the single sign on process between CPS and APS. Once the single sign on process is successful, the patient in context's profile in APS will open in the default browser without you having to enter any additional credentials.



Note: If a system error is encountered during the single sign on process, the APS login page will open in the default browser.

After launching APS via a CPS message, you will only have access to the patient in context's profile in APS. To navigate to other APS screens, select the **LOGIN TO APS DASHBOARD** link to open the APS login page.



Note: You will need to close the APS Patient Profile in order to select the **LOGIN TO APS DASHBOARD** link.

CPS and STRAND Integration

STRAND Single Sign On

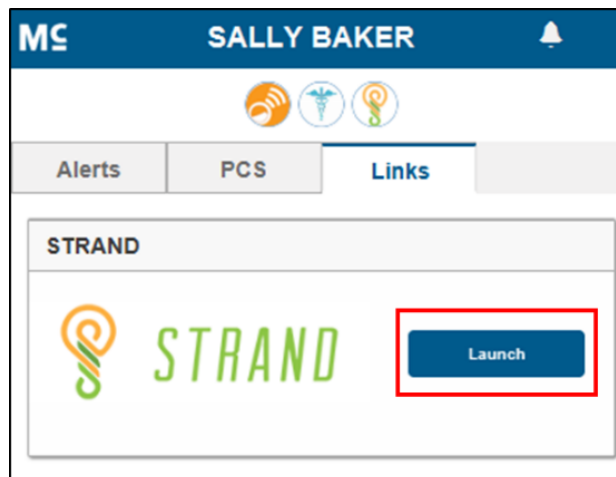
The integration between CPS and STRAND allows pharmacy staff members to identify high risk patients eligible for additional clinical services to be documented in a Pharmacy eCare Plan. STRAND facilitates clinical interventions and patient engagement by coordinating enrollment, documentation and education for coaching programs, and tracking clinical results. Single sign on functionality is available with the CPS and STRAND integration and can be initiated in one of two ways, either a CPS message or using the **Links** tab in the Clinical App. With this functionality, after the first successful log in, when you launch STRAND via a CPS message or the Clinical App **Links** tab, the patient in context's profile in STRAND will open in the default browser with you already logged in to STRAND.

NOTE: STRAND will open in the default browser for EnterpriseRx users on version 9.2.0.0 or higher. For EnterpriseRx users on a version prior to 9.2.0.0, STRAND will open within an EnterpriseRx window.

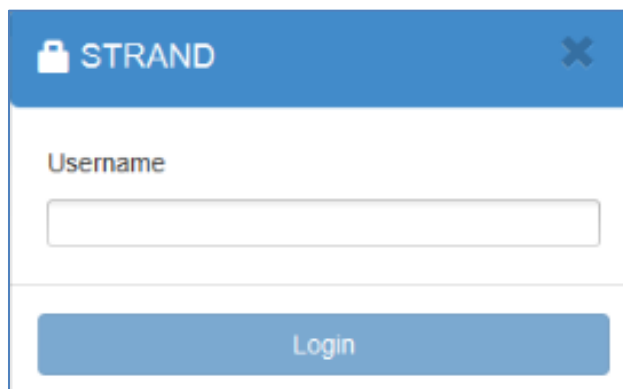
When a STRAND message is available in CPS, you can select the STRAND **Document** button to open STRAND in the default browser and initiate the single sign on process.



When the patient in context is enrolled in STRAND, the **Links** tab will display within the Clinical App. Within the **Links** tab, you can select the **Launch** button to open STRAND in the default browser and initiate the single sign on process.



After selecting the STRAND **Document** or **Launch** button, if you have not yet entered your STRAND username in the logged in facility, you will be prompted to do so.



The screenshot shows a dialog box titled 'STRAND' with a close button (X) in the top right corner. It contains a 'Username' label above a text input field. Below the input field is a blue 'Login' button.

NOTE: You will only be prompted to enter your STRAND username the very first time you select the STRAND **Document** or **Launch** button in a facility. At any point, however, if a STRAND username error is encountered during the single sign on process, you will be prompted to enter your STRAND username a maximum of two times per pharmacy management session. Once the maximum number of STRAND username prompts is met, if the STRAND username error continues, an error will display within CPS and the STRAND login page will open in the default browser with you not automatically logged in to STRAND.

When you successfully input your STRAND username and the single sign on process is successful, the patient in context's profile in STRAND will open in the default browser with you already logged in to STRAND.



NOTE: If a system error is encountered during the single sign on process, the STRAND login page will open in the default browser with you not automatically logged in to STRAND.

Pharmaserv version 8.1.1.0 or higher is required for STRAND single sign on functionality. McKesson recommends that EnterpriseRx users be on EnterpriseRx version 9.2.0.0 or higher for STRAND single sign on functionality.

APPENDIX

Enrollment and Program Message Data Filters

Note: Pharmserv version 7.5.0.0 or greater or EnterpriseRx 6.1.0.0 or greater is required unless noted otherwise

Data	Attribute	Value(s)	
		Pharmserv	EnterpriseRx
Written Product	Product Name	Text field	Text/search field
Written Product	NDC Number 11 Digits	Text field	Text/search field
Written Product	NDC Number 9 Digits	Text field	Text/search field
Written Product	NDC Number 5 Digits	Text field	Text/search field
Written Product	Product Schedule	2 3 4 5 6 – Legend Rx Blank – No Control	2 3 4 5 6 – Legend Rx 8 – OTC Blank – No Control
Written Product	GPI GCN	Text field	Text/search field
Written Product	Product Groups	Text field Note: you must populate the Value field with the information found in either the Clinical Category Group or Clinical Category Class field for the type of item. This information displays on the Clinical Information window of Item Maintenance in Rx Processing. It must be entered exactly as it displays in those fields	Text/search field
Dispensed Product	Product Name	Text field	Text/search field
Dispensed Product	NDC Number 11 Digits	Text field	Text/search field
Dispensed Product	NDC Number 9 Digits	Text field	Text/search field

Dispensed Product	NDC Number 5 Digits	Text field	Text/search field
Dispensed Product	Product Schedule	2 3 4 5 6 – Legend Rx Blank – No Control	2 3 4 5 6 – Legend Rx 8 – OTC Blank – No Control
Data	Attribute	Value(s)	
		Pharmaserv	EnterpriseRx
Dispensed Product	GPI GCN	Text field	Text/search field
Dispensed Product	Product Groups	Text field Note: you must populate the Value field with the information found in either the Clinical Category Group or Clinical Category Class field for the type of item. This information displays on the Clinical Information window of Item Maintenance in Rx Processing. It must be entered exactly as it displays in those fields	
Patient	Patient Status	Active	Active
Patient	Enrolled Programs	Populated by CPS	Populated by CPS
Patient	Non Enrolled Programs	Populated by CPS	Populated by CPS
Patient	Blood Pressure Systolic	Populated by CPS	Populated by CPS
Patient	Blood Pressure Diastolic	Populated by CPS	Populated by CPS
Patient	Blood Glucose Fasting	Populated by CPS	Populated by CPS
Patient	Blood Glucose Postprandial	Populated by CPS	Populated by CPS
Patient	Blood Glucose A1C	Populated by CPS	Populated by CPS

Patient	Cholesterol LDL	Populated by CPS	Populated by CPS
Patient	Cholesterol HDL	Populated by CPS	Populated by CPS
Patient	Total Cholesterol	Populated by CPS	Populated by CPS
Patient	Triglycerides	Populated by CPS	Populated by CPS
Patient	BMI	Populated by CPS	Populated by CPS
Patient	Pulse	Populated by CPS	Populated by CPS
Patient	Cholesterol PDC	Populated by CPS/APS	Populated by CPS/APS
Patient	Hypertension PDC	Populated by CPS/APS	Populated by CPS/APS
Patient	Diabetes PDC	Populated by CPS/APS	Populated by CPS/APS
Patient	SUPD	Populated by CPS/APS	Populated by CPS/APS
Patient	HRM	Populated by CPS/APS	Populated by CPS/APS
Patient	Codes	Populated by CPS	Populated by CPS
Data	Attribute	Value(s)	
		Pharmaserv	EnterpriseRx
Patient	Additional Data	Populated by CPS	Populated by CPS
Patient	Patient Groups	Pharmaserv does not support this data filter	Text field
Patient	Smoker Code	1 – Non Smoker 2 – Smoker Blank – Not Specified	1 – Non Smoker 2 – Smoker Blank – Not Specified
Patient	Pregnancy Indicator	1 – Not Pregnant 2 – Pregnant Blank – Not Specified	1 – Not Pregnant 2 – Pregnant Blank – Not Specified
Patient	Terminally Ill	Pharmaserv does not support this data filter	Yes No
Patient	Age	Text field	Text field
Patient	Allergy Code	Pharmaserv does not support this data filter	Text/search field
Patient	Allergy Description	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Patient	Gender Code	Male Female Other	Male Female
Patient	Zip	Text field	Text field
Patient	State	Text field	Text field
Patient	Care Location	Blank – Not Specified 1 – Home	0 – Not Specified 1 – Home



		2 – Inner Care 3 – Nursing Home 4 – Long Term Extended Care 5 – Rest Home 6 – Boarding Home 7 – Skilled Care Facility 8 – Sub-Acute Care Facility 9 – Acute Care Facility 10 – Outpatient 11 - Hospice	2 – Inner Care 3 – Nursing Home 4 – Long Term Extended Care 5 – Rest Home 6 – Boarding Home 7 – Skilled Care Facility 8 – Sub-Acute Care Facility 9 – Acute Care Facility 10 – Outpatient 11 - Hospice
Facility	Facility Type	Pharmaserv does not support this data filter	Retail Store Central Prep Central Fulfillment Corporate Office Call Center Training Center
Facility	State	Text field	Text field
Data	Attribute	Value(s)	
		Pharmaserv	EnterpriseRx
Facility	Zip	Text field	Text field
Facility	NCPDP Provider ID	Text field	Text field
Rx	Rx Status	Active Profiled Discontinued	Active Profiled Canceled Pending Approval Inactive DUR Rx Transferred Inactive Profiled Inactive DUR Rx Denied
Rx	Rx Fill	New Refill	New Refill
Rx	Prescription Origin Code	0 – Not Known 1 – Written 2 – Telephone 3 – Electronic 4 – Facsimile 5 – Pharmacy Blank - Blank	0 – Not Known 1 – Written 2 – Telephone 3 – Electronic 4 – Facsimile 5 – Pharmacy Blank - Blank

Fill Level	Item Source	Pharmaserv does not support this data filter	Unspecified SYNC IVR PPI Fax ERP Phone Mail Internet Store
Fill Level	Delivery Option	Pharmaserv does not support this data filter	Text field
Fill Level	Fill Number	Text field	Text field

Data	Attribute	Value(s)	
		Pharmaserv	EnterpriseRx
Fill Level	Third Party Name	Text field You MUST enter data exactly as it displays in Pharmaserv. For cash claims, you need to enter Cash ; for AR charge claims, you need to enter Charge .	Text field
Fill Level	Third Party Code	Text field	Text field
Fill Level	BIN	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Fill Level	PCN	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Fill Level	Group ID	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Fill Level	Cardholder ID	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater

Fill Level	Cash Payment	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Fill Level	Third Party Group ID	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Fill Level	Third Party PCN	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Fill Level	Third Party BIN	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Fill Level	Third Party Cardholder ID	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Fill Level	Cash Payment	Pharmaserv does not support this data filter	Yes No *9.1.0.0 or greater
Fill Level	Medicare	Yes No	Yes No
Fill Level	Medicaid	Yes No	Yes No
Prescriber	Specialty 1	Pharmaserv does not support this data filter	See system options
Prescriber	Specialty 2	Pharmaserv does not support this data filter	See system options
Prescriber	Specialty 3	Pharmaserv does not support this data filter	See system options
Prescriber	State	Text field	Text field

Data	Attribute	Value(s)	
		Pharmaserv	EnterpriseRx
Prescriber	Zip	Text field	Text field
Prescriber	NPI	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater
Prescriber	DEA	Pharmaserv does not support this data filter	Text field *9.1.0.0 or greater