

# RXLOGIC PBM APPLICATION RELEASE NOTES 1.15.2

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# RXLOGIC PBM APPLICATION UPDATE

## UPDATE INFO

<b>Update Type</b>	Minor
<b>Update Description</b>	<p>This version update includes stabilization and performance items and various bug fixes.</p> <p>Added Features:</p> <ul style="list-style-type: none"> <li>• NCPDP Demographic Only Updates</li> <li>• Date Ranges on Individual Rx Limits</li> <li>• Sub Group Relationship Batch Term</li> <li>• Process Rules New Action Screen</li> <li>• Single 835 RegenerationDup</li> </ul>
<b>Version Number</b>	1.15.2

<b>Production Release Date</b>	2/11/2025
<b>UAT Release Date</b>	1/30/2025
<b>QA Approved Date</b>	

<b>Production Hotfix Date</b>	

## RELEASE DETAILS

### NEW DEVELOPMENT



The New Development section of the Release Notes is dedicated to work items (User Stories, Tasks, etc...) that are new functionality that was not in previous versions of the application.

This section has additional information and details that the Bug Fixes section does not have. If you have additional questions on any of the new functionality, please ask your RxLogic Client Manager or check out the User Guide for the new documentation.

## CLAIM

### CLAIM PROCESSING

Add Percentage Sales Tax Rate Submitted field (HE) (18912) – The Percentage Sales Tax Rate Submitted field (HE) was added to the Pricing tab of the Claim Processing screen.

The screenshot shows the 'Claim Processing' interface with the 'Pricing' tab selected. The 'Transaction Level' is set to 'Claim'. The 'Percentage Sales Tax Rate Submitted (HE)' field is highlighted with a red box. Below is a table of the data shown in the Pricing tab:

Field Label	Value
Ingredient Cost Submitted (D9)	651.50
Patient Paid Amount Submitted (DX)	Patient Paid Amount Submitted
Percentage Sales Tax Amount Submitted (GE)	5.00
Usual and Customary Charge (DQ)	675.00
Dispensing Fee Submitted (DC)	23.50
Incentive Amount Submitted (E3)	Incentive Amount Submitted
<b>Percentage Sales Tax Rate Submitted (HE)</b>	<b>Percentage Sales Tax Rate Submitted</b>
Gross Amount Due (DU)	675.00
Professional Service Fee Submitted (BE)	Professional Service Fee Submitted
Flat Sales Tax Submitted (HA)	Flat Sales Tax Submitted
Percentage Sales Tax Basis Submitted (JE)	Percentage Sales Tax Basis Submitted

## MEMBER

### MEMBER MANAGER

Resizable Member Group Eligibility Box (19550) – The Member Group Eligibility box in the Member Manager can now be vertically resized by clicking and dragging on the bottom right corner.

Member Group Eligibility			
Show Group Summary			
Group Number	Start Date	End Date	Coverage
JENNACC01	01/01/2025	12/31/2222	Family
JENNACC01	09/01/2024	12/31/2024	Family
JENNACC01	01/01/2024	08/31/2024	Individu
883276	11/01/2023	12/31/2023	Individu
883276	01/01/2023	03/31/2023	Individu

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## PHARMACY

### NCPDP LOADING MANAGER

Demographic Update Only (16629 / 19460 / 19602) – A new option, "Update Demographic Info Only", was added to the NCPDP Loading Manager configuration. When this option is set to YES, only the demographic info from the ProviderInfo data set from NCPDP will be updated. The type of update performed is based on the other settings on the NCPDP Loading Manager screen.

To clearly call out this configuration, a "Demographics Only" badge is displayed on the NCPDP Loading Options bar when the Update Demographic Info Only toggle is set to YES.

**NCPDP Loading Manager**

Review Updates | Configuration Options

**NCPDP Loading Options** Demographics Only

Manual Updates  
The Manual Updates option will turn off any updates in all Pharmacy data from NCPDP. Use this option if you plan on physically and manually updating each and ever pharmacy record by hand.

Direct Automatic NCPDP Updates  
The Direct Automatic NCPDP Updates option will turn on automatic updates of Pharmacy Data from the weekly NCPDP data update. Use this option if you want to automatically accept all changes from NCPDP data to be applied to your pharmacy records. This option will keep any additional records that are not in the NCPDP data.

Direct Updates from NCPDP Removing Unmatched Data  
The Direct Updates from NCPDP Removing Unmatched Data will turn on automatic updates of Pharmacy Data from NCPDP. The data from NCPDP will fully replace existing pharmacy data, removing any records that are not in the NCPDP data set.

Automatic Adds, Review Others  Only for Active Pharmacies  
The Automatic Adds, Reviews Others option will turn on automatic updates of Pharmacy Data from the weekly NCPDP data updates for new record additions, however any updated or changed data will be queued up for review and approval by a person. Use this option if you want to allow all new Pharmacy additions to be automatically applied but want to manually review and approve any changes from NCPDP before they are applied to your Pharmacy Data.

Apply Skips Chains:   Apply Skips NCPDPs:

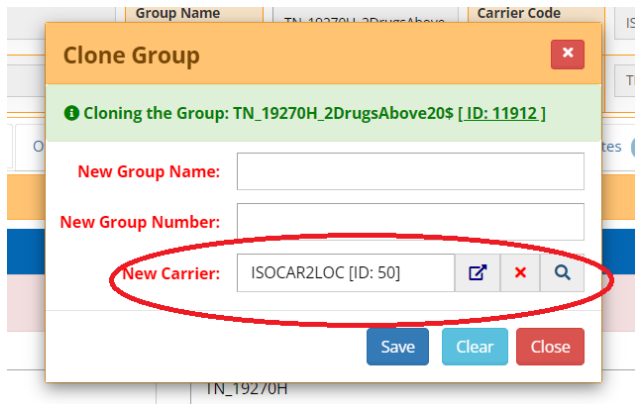
The following Pharmacies/Chains will be subject to review. All other pharmacies will apply updates without review. This only applies if one of these lists is populated.

Update Demographic Info Only  
Update Demographic Info Only will only update data from the ProviderInfo data set from NCPDP. The settings above will still dictate the overall update methodology, and this option will choose whether or not to constrain it to just the Provider Info table.

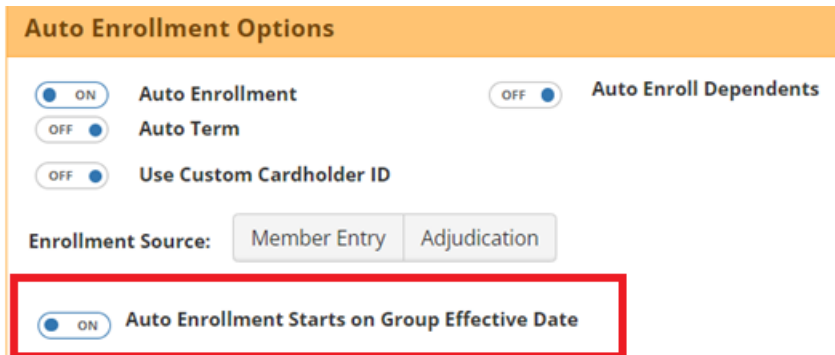
## PLAN DESIGN

### GROUP MANAGER

Carrier Selection When Cloning Groups (19399) – When cloning a Group, the Carrier can now be changed. The Carrier attached to the Source Group is set as the default value.



New Auto Enrollment Starts on Effective Date Toggle (19627 / 19328) – A new toggle was added to the Group Manager that changes the Eligibility start dates for auto enrolled members to be the Group’s effective date. When off, the Date of Service of the enrolling transaction will be used as before.



Addition of Date Ranges to Rx Limits (19270 / 19549) – The Individual Rx Limits tab on the Group Manager now includes date range values for the Rx Limit options, except for Secondary Max Dollar Limit and Subrogation Runout Days options. Each group can have multiple date range assignments, each with their own limits therein.

**Individual Rx Limits**
ON

**Date Driven Options**

12/2/2024 - 12/06/2024

✎
Update

Please Select

12/18/2024 - 12/27/2024

Days

12/2/2024 - 12/06/2024

Days

**Max Dollar per Script**

Buy Amt
Sell Amt

**Dollars**

**Over Max Dollar Limit Msg**

i

ON
Max Dollar per Script (Including Copay)

**Reject Days from Rx Written Date**

Days

**Allow**

**Drugs Above \$**

Created: 01/29/2025 09:06:22 AM By: jchiquet
Last Changed: 01/29/2025 09:06:22 AM By: jchiquet

**Non Date Driven Options**

**Secondary Max Dollar Limit**

**Subrogation Runout Days**

In this example, the first date range beginning with 12/18/2024 and the second date range starting with 12/02/2024 can be separately configured with separate Limits. Groups can have as many date ranges configured as required, as long as no date ranges overlap.

To continue using blanket Rx Limits agnostic of date, the recommendation is to use a date range of 01/01/2001-12/31/2222, which will be the default for newly created Groups. On deploy of this new version, the existing Group settings are set up with this date range as a starting point.

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#### SUB GROUP MANAGER

Informational Text for Effective & Termination Dates (19603) - Informational text that pertains to the functionality of a Sub Group's Effective and Termination Dates was added. This reiterates that these are for Plan Administrator record keeping to know which Sub Groups are still valid, and are not used during the adjudication process.

**Update Sub Group: TESTSEAN SUBGROUP [ ID: 138 ]**

<b>Sub Group Code:</b>	TESTSEAN SUBGROUP		
<b>Sub Group Name:</b>	TESTSEAN SUBGROUP		
<b>Group ID:</b>	TEST SEAN	✎	✖
<b>Populate Dates From Group</b>	OFF <input type="checkbox"/>		
<b>Sub Group Effective Date:</b>	01/01/2025	✕	📅
<b>Sub Group Term Date:</b>	12/31/2025	✕	📅
<b>Effective and Termination Dates on Sub Groups do not impact Adjudication. These dates are for Plan Administrator record keeping to know which Sub Groups are still valid.</b>			
<b>Benefit Start Month:</b>	- Please Select Day -	▼	Please Select Month

Member/Sub Group Relationship Batch Term (16929 / 19605) – A new option for Batch Term Date was added to the Member Library screen, accessed by clicking the Show Members button on the Sub Group Manager screen. This screen allows for maintenance of the Member Sub Group coverages for the selected Sub Group through two types of updates:

- When just a Term Date is entered, that term date will apply to all active Member coverage records for the selected Sub Group.
- When a Current Term Date is entered, the date entered in the Term Date field will only apply to Members with a Sub Group record matching the term date that was entered in the Current Term Date field.

New filter by options were also added to the Member Library screen for Active, Inactive and All.

**Member Library**
Filter By : Active 0 Inactive 2 All 2 Batch Term Date
Export ✎ ✖

Member ID	Cardholder ID	Person Code	Group Number	Group Name	Effective Date	Termination Date
545043	544048	01	TESTSEAN	TEST SEAN	01/01/2025	01/01/2025
545278	544283	01	TESTSEAN	TEST SEAN	01/01/2025	01/01/2025

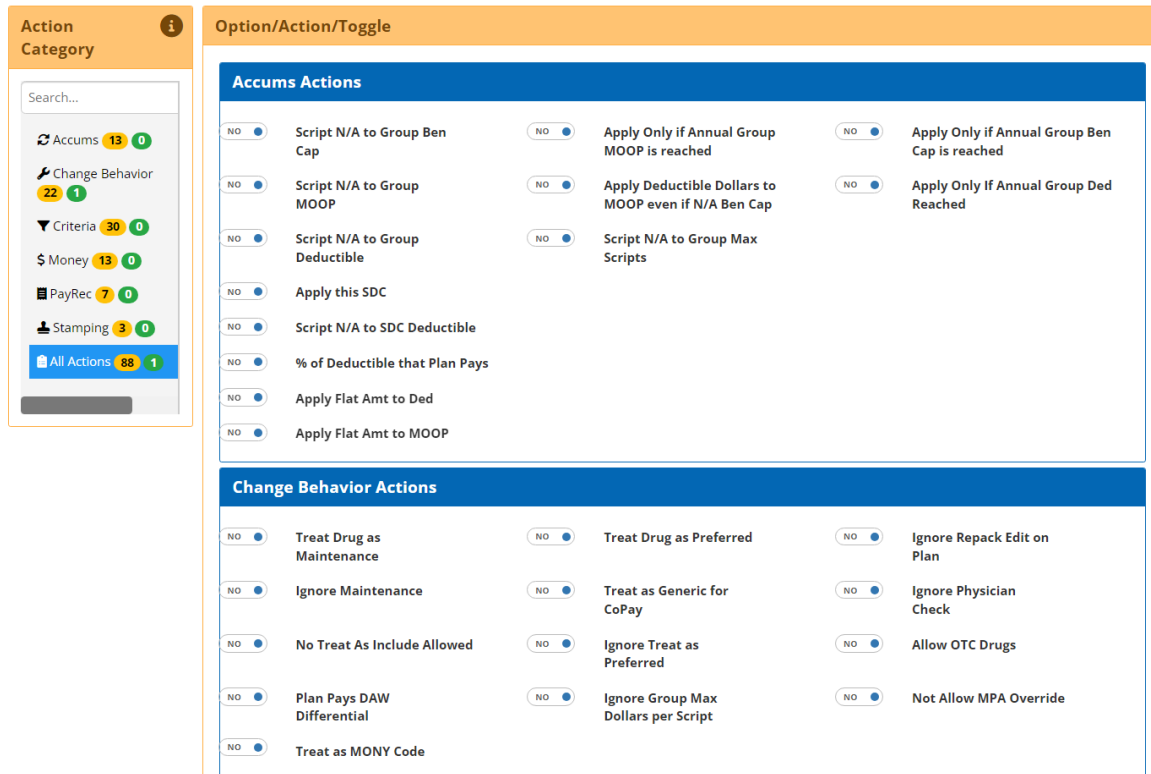
**Batch Term Date Update** ✖
   
**Term Date:** - Please Select - 📅
   
**Current Term Date:** - Please Select - 📅
   

Save
Clear
Close

## RULES & CALCULATORS

### PROCESS RULES

Addition of New Process Rules Actions Screen (19345) – A new Process Rules Actions screen was implemented, currently separate from the original Process Rules Actions screen under a new Process Rules (v2) menu item.



The new implementation categorizes the Process Rule Actions into the “Accums,” “Change Behavior,” “Criteria,” “Money,” “Payrec,” and “Stamping” categories, as well as “All Actions” to view them all at once. A search was placed on the left to easily find the desired action.

This new screen is still being tested, but we encourage our users to try it and provide feedback. This new Action screen will replace the current version of the Actions tab in a future release, but for now the original Process Rule Actions screen remains available and all links to Process Rules still utilize the original version.

To access the new screen, the user must have the Process Rules (v2) App area.

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## FILES AND JOBS

### JOB MANAGER

Clearing of Standard Eligibility History Table (19318) – The standard eligibility process was modified to clear the history table (StandardEligibilityStaging) at the start of each eligibility load. This was implemented to improve the overall speed of the import on larger files.

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## BILLING & FEE MGMT

### BILLING MANAGER

Add Network Reimbursement ID to Billing Cycle File (19389) – Added the NetworkReimbursementID field to the end of the billing cycle file export, and updated Payrec to import a file with this field included.

PAYABLES MANAGER

Pay To Media Type Dropdown (19604) – When editing a Payment in the Payables Manager (either by selecting a processed Batch and editing the Payments therein, or during Step 4 of the Payables Wizard) the “Pay To Media” field is now a dropdown.

**Update/Review Payment Details: [ ID = 3773 ]**

**Warning!** Any changes made to this payment will only be contained in the Payables system and is a one time change for this Batch. Changes to P update any Pharmacy or Payment data beyond this Batch. If you want to make a global update to Pharmacy or Payment data, please make that c

**Warning!** Check Number Is Required.

<b>Batch Id</b> 1305	<b>Claim Count</b> 8	<b>Payer Id</b> Payer Id
<b>Pay To Name</b> DURHAM PHARMACY	<b>Pay To Media Type</b> Blank Blank 835 835 And Check Summary	<b>Pay To Routing Number</b> Pay To Routing Number
<b>Payment Amount</b> 453.2		<b>Check Or EFT Number</b> 3750

[Update Payment](#)

Regenerate 835 in Pay to Summary (17089) – When viewing the Pay to Summary in Payables (accessible by selecting a Batch Id and then selecting View Payments), users can now use a checkbox on the left to select a Payment. When a single Payment is selected, a “Regenerate 835” button now appears. This button creates a new 835 file for the selected Payment, reflecting any changes made to the Payment since the last 835 generation.

Batch ID : [ 1311 ] | Name : [ howmanypayments2 ] | Date : [ 07/19/2019 ] | Status : [ PaymentFilesGenerated ]

Pay to Summary For Batch ID:[1311] [Export](#) [Regenerate 835](#) [Update Status](#)

<input type="checkbox"/>	Edit Payment	ID	PaymentStatus	Pay to ID	Pay to Name	Claim Count	Total Amount Paid	Payment Amount	Payment Method
<input checked="" type="checkbox"/>		3775	New	<a href="#">0100886</a>	LIMESTONE DRUG	1	\$ 76.13	\$ 76.13	Check
<input type="checkbox"/>		3776	New	<a href="#">0101232</a>	DURHAM PHARMACY	1	\$ 76.13	\$ 76.13	Check

HELP & SUPPORT

RELEASE HISTORY

Added Release Notes (19562 / 19564 / 19563 / 19565 / 19566 / 19567 / 19581) – Added release notes for releases 1.14.5, 1.14.6, 1.14.7, 1.14.8, 1.14.9, 1.15.0, 1.15.1.

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## DATABASE

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### NEW FIELDS

The following new fields were added as part of this release:

Database / Table	Table	Field	Data Type	Length
Enrollment	Group	UseGroupStartDateForAutoEnrollmentDate	BIT	
Enrollment	EntityFields_VarcharMapping	New Table		
NCPDP	NCPDPIImportSettings	DemographicUpdatesOnly	BIT	
PayRec	SourceFileDats	NetworkReimbursementId	NVarchar	10

### BUG FIXES

The Bug Fixes section of the Release Notes documentation is dedicated to existing functionality of the application that had a defect or system issue that was preventing it from functioning properly. No new functionality should be included in this section, so if you are not sure how a particular screen or area should be working, please refer to the User Guide for additional information.

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## CLAIM

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### ADJUDICATION

- Fixed an error when the group is utilizing the “NPI Required and Ensure Prescriber Check Digit” option and the pharmacy submits the Prescriber ID Qualifier but NO Prescriber ID Field. Going forward the pharmacy will receive a rejection of 25 M/I Prescriber ID (Prescriber ID NOT Submitted). (19321)
- Fixed an issue when the pharmacy sends Patient ID Qualifier of 01 but doesn’t submit a valid SSN on a transaction that would Auto Enroll the member. Now, when the qualifier of 01 is sent and an invalid SSN the system will auto enroll the member as though no SSN was submitted. (9400)

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### CLAIM ACTIVITY

- Changed the query used to determine if new transactions have been processed to reduce database impact and improve response time of query. (19329)

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## DRUG

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### DRUG LOOKUP

- Fixed an issued where the UDF was showing on every NDC rather than the specific NDC it was added to. (19443 / 19570)
- Fixed issue when searching for drugs by Generic Name, duplicate entries were showing in the suggested results in green. (19455)

## FORMULARY MANAGER

- Fixed issue where the filters were still applied on the Update Formulary List screen when going from one Formulary to another. (19463)

## PLAN DESIGN

## GROUP MANAGER

- Removed the “Not Allow Inactive Drug” option from the Group Manager -> Other Configs tab. This edit was nonfunctional. (19344)

## DUR MANAGER

- Fixed an issue on the Ingredient tab in the Update Drug Utilization Review Configuration for Ingredients box where the Apply DUR Override Reject List was not showing. (19578)

## RULES & CALCULATOR

### PROCESS RULES

- Corrected the alignment of toggles on the Update Config screen of process rules so that all Summary of Action options line up. (19441)
- The “Max Reimbursement Amount Per Unit” Action field now correctly allows values of 0- 999999.99999. (19382)

### REFILL RULES

- Fixed an issue when the Pharmacy Phone Number in Response option is enabled, but the related Pharmacy does not have a phone number. Previously, this caused an object reference error. (18871)

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## FILES AND JOBS

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### JOB MANAGER

- Fixed an issue when cloning a job without a schedule set in the Job Schedule Settings, an error occurred when saving the new job. (19477)
- Fixed an issue with the Partial Standard Eligibility where a duplicate key error was encountered on a group change for an existing line where the same group had a different coverage type on another historical line. (19336)

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### PHARMACY CARD MANAGER

- Fixed issue that when a schedule was defined on the Print Card Job, clicking on Save Daily Schedule and returning to the screen could cause the hours set for the job to start to shift by 4 hours. (18962)

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## CLIENT APIS

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### GENERAL

- Fixed a configuration issue where Pricing Requests may have been sent to the adjudicator designated for live Pharmacy traffic for clients with more than one Adjudicator instance. (19347)

## PRODUCTION HOTFIXES

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## CLAIM

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### ADJUDICATION

- Improved Comparison logic between RxIClient External Adjudicators for Clawback (negative Total Pay To Pharmacy) scenarios by adjusting the Ingredient Cost by the total Pharmacy Due to reflect the true Overall Value of the transaction. As a part of this, Pricing Requests better reflect the full value of the transaction. This change brings with it 2 limitations on Pricing Requests:
  - Plans utilizing an External Adjudicator with a clawback must be set with 100% copay, as this local copay will be used on Pricing Requests. This is on the client utilizing the External Adjudicator.
  - The Ingredient Cost on the Pricing Request is inflated by the amount of the Clawback instead of having a negative Total Pay. This means a transaction that in true adjudication would have a \$2 ingredient cost and a -\$5 Total Pay, will have a \$7 Ingredient Cost on the pricing transaction. meaning a transaction. The true Adjudicated request will still have the proper Total Pay and Ingredient Cost. (19639)

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### CLAIM ACTIVITY

- Improved lookup time for loading Claims in the Claim Activity grid. Large amounts of claims will now load faster. (19577)