

Issue No. 13  
July 1999

## NEWS BULLETIN

### ARMY MEDICAL EXPENSE AND PERFORMANCE REPORTING SYSTEM (MEPRS)

The Army MEPRS Program Office, San Antonio, Texas, publishes and distributes the U.S. Army MEPRS News Bulletin quarterly by fiscal year to MEPRS administrators worldwide. We have designed the Army MEPRS News Bulletin to enhance communication within the U.S. Army medical treatment facilities.

/signed/  
ROMONA K. BACON  
U.S. Army MEPRS Program  
Officer

#### DISTRIBUTION:

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Biostatistics Activities

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## SECTION I: TRI-SERVICE HAPPENINGS

### 1. EAS III

#### A. SALARIES FOR NAF EMPLOYEES

For those MTFs that have NAF employees, please begin including their salaries in your MEPRS data. Beginning in August, add the salaries for NAF employees through the Update Manual DES screen in EAS. Use the PEC appropriate for the transaction, and use the SEEC 41.10 and FRER for the APPROP. The Manual DES is cumulative but does not reflect the cumulative data on the screen, so you must enter the Year-To-Date salaries. All the FTEs associated with these salaries should already be captured through UCAPERS.

#### B. CENTRALLY MANAGED FUNDS

It is important that MEPRS capture all expenses associated with the MTF. This includes all expenses that are paid out of centrally managed funds. The expenses are entered through the Manual DES screen in EAS. Use the PEC and SEEC appropriate for each transaction.

Note: When you perform your financial reconciliation remember to account for all of your Manual DES entries. Please retain all input documents used in this process.

#### C. CONTRACT EMPLOYEE SALARIES

If your MTF has an employee whose salary is paid through a central contract, please include that salary in EAS. The salary amount should be available to you from the Materiel Inspection and Receiving Report, DD Form 250. Access the MANUAL DES screen, enter the record using the FRER APPROP, and SEEC 41.10 and the appropriate PEC. This scenario assumes that the contract cost, because it is a central contract, does not appear in STANFINS.

#### D. EAS III RELEASE 9.4.3

Fort Irwin was selected as the BETA test site for the 9.4.3 release. The release is to correct some programming errors in AHCFMS.

The STANFINS Validation process has been corrected so that expenses for the prior year are mapped into the current year during validation. NOTE: Some EORs were terminated in FY98 and do not have a FY99 mapping in AHCFMS. When these records come across, AHCFMS validation process only checks to see if the EOR is valid for the specific accounting year. However, when these

records are merged through the EAS III Batch Merge process, they will error out of the system because there exists no valid SEEC for FY99. These expenses must be added into your EAS financial data. AHCFSMS will be modified in a later release so that these records will error out in AHCFSMS instead of being passed to EAS. When an EOR is rejected because there is no mapping to another EOR you must review the latest change of the 37-100. Sections III or IV to determine if DFAS has mapped the old EOR to a new EOR. Under some circumstances an old EOR may be mapped to more than one new EOR. When that is the case you must talk with your Budget Officer to determine which the 'best choice'. EOR might be based on the intent of the old and new EORs .

STANFINS Error Correction Unit has been corrected to allow a reactivated MEPRS code to be used to correct records.

AHCFSMS Validation process has been corrected to ensure that the program does not terminate when the assigned reference numbers of one or more records in the STANFINS Financial Pure YTD file have the same assigned reference numbers as the corresponding records in the STANFINS YTD file, or in the STANFINS Salary Pure YTD file and the STANFINS Salary YTD file. NOTE: This error was only occurring at specific sites based on file size.

## 2. EAS IV STATUS

Fort Hood is BETA testing the EAS IV release for the Army. There has not yet been a successful computation/allocation but we expect to run that process within a week. Some of the problems that prevented running of the computation occurred because of a few glitches in the UCAPERS to EAS IV interface. These problems were overcome. Currently there is still a problem with the ADS file and requires a modification to EAS IV. This modification is expected to be in place within the week.

We are bringing EAS IV to Fort Sill on 13 September 1999. If there is not a moratorium on fielding new systems, we will begin implementing EAS IV based on the enclosed tentative schedule. (See Attachment)

## 3. UCAPERS

### **UCAPERS OCCUPATIONAL CODE TABLE CHANGES**

**DO NOT IMPLEMENT THESE CHANGES UNTIL AFTER YOU HAVE PROCESSED SEPTEMBER EXPENSE!!!**

In order to comply with the new ARMY EAS III/EAS IV requirements the Occupational Code Table will be changed in the current UCAPERS system to reflect an Alpha character in the 5<sup>th</sup>

position for enlisted ranks. If you have any enlisted (EL) or Foreign Military (FM) personnel entered on your Master Personnel File with a numeric in the 5<sup>th</sup> position please change the numeric to an alpha character, i.e. 91B10 will change to 91B1O, 71G20 will change to 71G2O etc.

**DO NOT IMPLEMENT THESE CHANGES UNTIL AFTER YOU HAVE PROCESSED SEPTEMBER EXPENSE!!!**

MS Officers that have been entered with alpha characters in the 4<sup>th</sup> and 5<sup>th</sup> position will have to be changed on your Master Personnel File to reflect numeric characters, i.e. 67FOO will have to be changed to 67F00; 67A0O will have to be changed to 67A00 etc.

You will be notified by this office regarding when these changes will be effective. Once the new codes are programmed into the EAS III/IV systems they will no longer take the numeric codes in the stated positions and processing will result in errors.

**DO NOT IMPLEMENT THESE CHANGES UNTIL AFTER YOU HAVE PROCESSED SEPTEMBER EXPENSE!!!**

## SECTION II: ITEMS OF INTEREST

### 1. BUSINESS OBJECTS Version 4.1

In the near future the MEQS III server will be converted to a newer version of Business Objects. As a result the graphical view of the data will be quite different. There will be no change in the same basic method for retrieving data from the database. You will still have to define the results, conditions, sorts, etc. you wish to retrieve; the "look" will be different. Training on the use of the new version can be obtained through contacting Business Objects and requesting a "Personal Trainer" CD for the newest version. You can contact Business Objects by calling Jacqueline Biggio, 703-708-9661.

This CD walks the individual through the steps of building a query and formatting the results. It also has varying levels of expertise, from beginner to expert. Each CD permits the definition of individual training plans. You will be asked if and how often you need to perform the below tasks in the performance of your job.

- Access data from the corporate database
- Create a crosstab (or pivot table) report
- Enhance the presentation of a report
  - Group common data with sections
  - Add page headers and footers
  - Adjust page sizing

- Combine tables and charts in the same report while using data from different sources. Apply more advanced calculations to report data, for example variations and aggregates, by using functions (statistical, logical, dates, mathematical).
- Analyze the data presented in a table or a chart by drilling through different levels of detail.

Once you have answered these questions you will be asked about your current skill level of:

#### DISPLAYING INFORMATION IN A REPORT

- Creating a new document
- Getting data
- Retrieving data
- Sorting Data
- Performing Calculations
- Printing the report

#### VIEWING INFORMATION IN DIFFERENT WAYS

- Accessing an existing document
- Creating a condition
- Creating a crosstab

Modifying the crosstab structure  
Enhancing the presentation

#### DISPLAYING A REPORT WITH FORMATTING

Duplicating a Report  
Sectioning a report  
Modifying the section structure  
Inserting a block  
Setting up the pages in a report  
Defining the page header and footer

#### MONITORING KEY INDICATORS IN A SUMMARY REPORT

Filtering data  
Inserting an additional query  
Combining multiple conditions  
Highlighting data  
Creating a chart  
Positioning blocks

#### ADDING ADVANCED CALCULATIONS TO A REPORT

Adding a formula  
Using a function  
Combining operators  
Building a prompted condition  
Calculating an aggregate  
Inserting the last run date

#### ANALYZING RESULTS BY EXPLORING VARYING LEVELS OF DETAIL

Preparing for analysis  
Focusing the analysis  
Taking snapshots of data  
Broadening the analysis  
Modifying the scope of analysis

After answering the above questions, your individualized training plan is created.

## 2. MEPRS BASIC

Army MEPRS Program Office conducted a "MEPRS Basic Course" for eleven attendees June 1999. This was the first of more to come. The target audience for the MEPRS Basic Course is newly assigned MEPRS staff members. An Advanced Course for management personnel in MEPRS and other disciplines is also planned for this fall, as well as another MEPRS Basic Course. The dates for these courses will be announced later through the RMCs. TDY funding must be provided by the attendee's organizational unit.

Contact: Army MEPRS Program Office, (210) 221-9750 ext. 502, DSN 471-9750.

### 3. MOS 91W

Throughout the past decade, combat operations and military operations other than war have increased the challenges in providing quality healthcare to all soldiers. Future Force XXI operational characteristics of increased battle tempo, lengthened evacuation distances, and greater unit dispersion and maneuver call for a redesign of the medical infrastructure to bolster first responder capabilities. Because of these evolving challenges, the 91W Healthcare Specialist will emerge with the essential skill mix to support the Army on the future battlefield and beyond.

The 91W initiative represents a dramatic enhancement in the far-forward capability of the AMEDD. Improved medical skills, emphasis on force health protection and ambulatory care and valuable periodic sustainment training all meet the needs of Army today and into the new millennium.

In time, all 91B and 91C soldiers (to include soldiers holding additional skill identifiers, ASIs) will reclassify into the new 91W MOS. This is scheduled to begin on October 1, 2001. Several years from that time will be made available to soldiers to accomplish the MOS transition. Reserve component soldiers will be authorized additional years of time beyond active component timetables.

In general, soldiers holding an MOS of 91B or 91C will continue to keep this ASI once the soldier successfully transitions to the new 91W MOS. A new ASI, M6, will be authorized for soldiers who hold a valid, unrestricted LPN license. Thus, most 91Cs can expect to become 91WM6s once they successfully transition.

MOS transition will require most soldiers to undergo additional training. This is to familiarize 91Bs and 91Cs with the new 91W tasks and ensure all 91Ws are properly enabled for success in their mission. Training will be made available in a number of formats to include unit training packages, distance learning (e.g., CDROMs), reserve component training, and resident format. Soldiers already trained and verified in some critical 91W skills will receive partial credit. To the fullest extent possible, recognized medical training programs would be recognized for partial credit. This might include EMT certification, LPN licensure, basic trauma life support (BTLs) and pre-hospital trauma life support (PHTLS) courses and advanced cardiac life support courses.

Selected 91B and 91C soldiers will be afforded the opportunity to transition directly into 91W in fiscal year 2002. Additional training for these soldiers will not be required, although a formal application process and documentation of credentials is anticipated. Because of their executive status, sergeants in the

grades of E7 (promotable), E8 and E9 will fall into this special or "grandfathered" category.

91B and 91C soldiers of any grade who possess specialized training and certifications and licensure will also be grandfathered. This includes soldiers possessing one of the following three combinations of valid credentials:

(1) LPN plus National Registry EMT-Basic certification plus BTLS/PHTLS course completion.

(2) LPN plus National Registry EMT-Intermediate certification.

(3) National Registry EMT-Paramedic certification.

This policy is in place to maximize the opportunity for highly skilled medical soldiers to qualify for immediate transition, and is not intended to show a direct comparison between the 91W MOS and civilian credentials.

It is critical to recognize that the grandfathering policy is permissive in that it allows soldiers of certain rank or demonstrated skill to immediately qualify for transition without additional training. All other soldiers who do not grandfather will have the opportunity and time to train for and receive the 91W MOS.

#### 4. AOC 05A

In 1999, the title "commander," and the responsibilities that go with it, may belong to a member of any of the Army Medical Department's officer corps. A recently approved corps-immaterial command initiative has changed some long-standing practices.

The initiative for commands at all levels follows recent changes in general-officer assignment policies that resulted in Brigadier General Nancy Adams taking command of William Beaumont Army Medical Center and Brigadier General Bettye Simmons becoming Forces Command Surgeon.

Secretary of the Army, Mr. Togo West approved the change in January 1999, culminating a four-year process of studies, plans, briefings and approvals through various levels. The Navy and Air Force have used similar systems for about 20 years.

Written guidance has not been published regarding this issue. We will forward you specific information once we receive it.

#### 5. MEDICAL READINESS CODES

We are currently reviewing the Medical Readiness code mappings in UCAPERS to insure that they more accurately reflect current

doctrine. We are also investigating readiness reimbursements, PROFIS, and readiness backfill.

A Readiness conference has been scheduled for 28 July 1999 and should help answer some of our current questions. We should have more information regarding the above issues shortly.

## 6. ARMY HEALTH PROMOTION AND WELLNESS PROGRAMS

A new code has been established in order to account for the time and expenses expended in support of this function. The Functional Cost Code (FCC) or MEPRS code to be used is "FBBP". No Performance Factor has been established for FBBP. The FCC/MEPRS code (BHFA) currently in use will continue to be maintained for all direct patient care done by Community Health Nursing.

The FCC/MEPRS code "FBBP" can be utilized by all Health Professionals in the Army performing health promotion and wellness activities in the community of an army post, such as community health, health educators, and PPIP coordinators. The following elements will be included in this function:

- a. Community Needs Assessment
- b. Health Promotion Program Design
- c. Marketing of health promotion Program
- d. Co-ordination of Health Promotion Programs
- e. Implementation of Health Promotion Program.

Examples of potential interventions performed during Health Promotion and Wellness activities are screenings (blood pressure, cholesterol), classroom teaching, one-on-one counseling, conducting self reporting tools, providing Line Commanders with a synopsis of his troops health and providing programs to help behavior change.

## 7. EDITORIAL

It is imperative you make every effort to keep your command staff informed of what's happening at your facility as it relates to MEPRS. No one likes to be caught "off guard" with information relating to their facility, especially the unfavorable information. If you do not give your Commanders and Resource Managers routine briefings on MEPRS happenings, you need to do so immediately. Command support is vital to our success, it's up to you to seek it out.

**ALSO,** I highly recommend you at least make the attempt to approach your Resource Managers on the subject of additional resources. I'm not saying you will get them, only merely suggesting you make the attempt. In addition, please consider the idea of cross-training members of your staff. The main reason I am suggesting this, is the frightening thought of a mass exit of our "MEPRS experts" during the next couple of years.

I also want to take this opportunity to say thank you for all your hard work and your continued efforts in striving to do the best you can in even the most difficult situations.

Romona K. Bacon

## SECTION III: WAM

### 1. WAM TEMPLATES FY00:

In order to create the SAS Detail File for FY00 the SAS Detail Create Option (SCRT) must be run. DO NOT RUN THIS OPTION PRIOR TO SEPTEMBER 26.

a. When the SCRT option is selected the system verifies the following:

(1) WAM is activated for the Group and for any of its lower divisions.

(2) The MEPRS Parent field is populated with a Defense Medical Information

System Identification (DMIS ID) that matches the Group ID.

(3) The WAM (NASDI) Core file for the new fiscal year has been installed.

(4) The SAS Detail file has not already been created for the new fiscal year.

NOTE: If a system check fails, CHCS displays a screen message and generates an associated (E)rror message in the WAM Exceptions Report under Category 14, SAS Detail File Activity.

b. CHCS creates the SAS Detail File for the indicated Group division (or lower division) for the new fiscal year, based on the following:

(1) Branch of service for the Group ID (or division).

(2) Guidelines for the branch of service in the WAM (NASDI) Core file (#8185) and the Business Rules file (#8185.3).

(3) Active MEPRS codes containing DMIS IDs in the MEPRS Codes file for the Group.

(3) WAM-activated divisions.

2. MEPRS CODE FILE. Review the MEPRS code file and inactivate any MEPRS codes that are not needed in WAM prior to running the SCRT. After the SAS Detail File has been created, it is also necessary to inactivate all Receiving MEPRS Codes on the Performing MEPRS code SAS's that are not needed in WAM.

3. FY00 CORE TABLE CHANGES. The inpatient cost pools have been added to the FY00 Core Table utilizing SAS 151 to SAS 220.

The inpatient cost pool SASs can now be populated by WAM for FY00. Insure the Ward Location File contains the Ward Cost Pool. After the SCRT has been run for FY00, manually build the SAS's for the Inpatient cost pools using the SAS Detail Enter/Edit option.

NOTE: REVIEW YOUR EASIII ASD AND INSURE SAS'S 151 TO 220 ARE NOT USED FOR ANYTHING BESIDES INPATIENT COST POOLS.

#### 4. SMMR2, CHCS Release 4.603, WAM changes:

a. After the user approves all of the templates and creates the EAS ASCII file, the system transmits the EAS ASCII file to EAS. During the create EAS ASCII file process, the system now screens out active SAS codes that have an active Performing MEPRS code but all of the Requesting MEPRS codes are inactivated.

b. When users access the SAS Detail Enter/Edit option to inactivate a SAS code, Performing MEPRS code, or Requesting MEPRS code, the system now displays the correct inactivation date which allows the reactivation functionality to work.

#### 5. CHCS WAM Documentation

The latest documentation for WAM and other CHCS systems can be found and downloaded from a special SAIC site found at <http://www.hctsdm.saic.com>. In the middle of the page that comes up, it states Please Log In. Click on that; it will ask for UserID: chcsps and password: contract2data. Page down to CHCS II - D/SIDDOMS Documents. (Please note that these documents require Acrobat Reader. If your system does not already have Acrobat Reader, a link is provided for you to download a copy.) The following is the document list. The enhancements brochures, WAM IUG, MEPRS Desktop Users Guide, Release Notes have been annotated with an asterisk. Many of the functions of the other systems directly affect how WAM operates; therefore, have included the entire list of documents relating to the other subsystems.

##### CHCS II v 4.6 Documents

- \* v 4.6 Enhancements Brochure (46da5000.pdf 214KB)
- \* v 4.602 Enhancements Brochure (sis95001brochr.pdf 307KB)
- v 4.6 HL7 Specification Update (46da1000.pdf 1702KB)
- Guide for Order Entry (46da5013.pdf 751KB)
- v 4.6 System Architecture Guide (SAG) (aes5000.pdf 1665KB)

v 4.6 System Specification (46da1006.pdf 2699KB)  
v 4.6 Functional Descriptions (46da4000.pdf 2057KB)  
Systems Engineering Management Plan (semp2003.pdf  
344KB)

CHCS II v 4.6 Release Notes 26 May 1998

\* CHCS v 4.602 Release Notes (24 Apr 1999) (sis9-6002.pdf  
282 KB)

\*CHCS v 4.603 Release Notes (06 Jul 1999) (sis9-6015.pdf  
375 KB)

CLN (clnrnotes.pdf 43KB)

DBA (dbarnotes.pdf 38KB)

DTS (dtsrnotes.pdf 5KB)

FQA (fqarnotes.pdf 25KB)

LAB (labrnotes.pdf 95KB)

MCP (mcprnotes.pdf 147KB)

MSA (msarnotes.pdf 20KB)

PAD (padrnotes.pdf 54KB)

PAS (pasrnotes.pdf 67KB)

PHR (phrrnotes.pdf 44KB)

RAD (radrnotes.pdf 21KB)

RT (rtrnotes.pdf 14KB)

TOOLS (toolsrnotes.pdf 18KB)

WAM (wamrnotes.pdf 20KB)

CHCS II v 4.6 Implementation Update Guides (IUGs) 08 Jul 1998

Common Files (cf\_iug.pdf 294KB)

CLN (cln\_iug.pdf 360KB)

EBC (ebc\_iug.pdf 314KB)

LAB (lab\_iug.pdf 274KB)

Addendum to LAB IUG, DII/LSI Interface 02 Dec 1998  
(im986000a1.pdf 58KB)

MCP Rev B. (4.602) 16 Apr 1999 (mcpiugREVB.pdf 264KB)

MRT (mrt\_iug.pdf 257KB)

PADMSA (padmsa\_iug.pdf 307KB)

PAS (pas\_iug.pdf 215KB)

PHR (phr\_iug.pdf 236KB)

RAD (rad\_iug.pdf 151KB)

\* WAM/EAS IV Rev A. (4.602) 01 Mar 1999 (wameasivrev.pdf  
210KB)

CHCS II v 4.6 Implementation Guides (IGs) 08 Jul 1998

WAM (wam\_ig.pdf 382KB)

CHCS II v 4.6 User Desktop Guides (UDGs)

Patient Notes and Electronic Files (spsm5000.pdf  
1197KB)

MCP (46da6025.pdf 2589KB)

\* MEPRS (ewam5000a.pdf 1687KB)

APV (46da6038.pdf 820KB)

DD7A (46da6037.pdf 598KB)

## SECTION IV: WEB HAPPENINGS

1. MEPRS WEBPAGE. Have you accessed the MEPRS web page lately? We would like the Army's website to become a reference source for the MTF's. In order to accomplish this goal, access the website, review what is available, and send your comments to the webmaster. We need to know what you think is important to include on our website. The address for the website is given below. Write it down and keep it handy.

### 2. MEPRS DISCUSSION BOARD

a. And, speaking of the webpage, we've added something new. We now have a link to a MEPRS Discussion Board. This is a chance for the sites to interact with each other, and help the other sites solve problems. By posting a question to the board, another site with the same problem can tell how they solved it. An example of this would be the WAM doubling recently experienced by one of the sites. Sites can also have their "offline" discussions on the Board; one site can pose the question, and other affected sites can respond with how they handle the situation. A recent example would be APV Minutes of Service.

b. There is also a Comments section and a Current Happenings section. Comments, rhetorical questions, questions that don't require action - all can be posted to the Comment board. Current happening is just what it sounds like - things coming up that the sites need to know. It can be used by the sites to post positions coming open, people moving to other sites, etc. The Army MEPRS Program Office can also post breaking news there.

c. The Board is not for urgent questions. If the sites have a problem that needs an immediate response, they can still write the mailbox. However, if the problem is not urgent, or if the analyst cannot help, the Board is a good place to go.

d. The success of the Board depends on the sites. If everybody could "surf" the Board once or twice a week, 15-20 minutes a time, and contribute when they can, everybody will benefit. You do not even have to wait until you have a question. If you finally solve something that's been hanging you up, post it on the Board. You never know, another site might be having the same problem.

e. Remember, the Board's success depends on YOU. Our analysts do their best, but they're only human. If we can all contribute to this Board, we can help each other do our jobs better. We are all we have; let's try to row together.

f. It's up to you.

g. To get to the Board, simply log on to the MEPRS webpage, and click on the link. The Board is password protected. The user id is MEPRS. The password is MEPRS1. Make sure you type it in all caps. Once on, you can move all over the Board with no problem. Per guidance, do not mention anyone BY NAME, although you can put your name. If you are announcing that someone is moving to another site, do not give their name; post your site name, and the other sites can get in touch with you.

## 2. MEPRS FUNCTIONAL MAILBOX

a. As most of you should know by now, another recent innovation is the MEPRS Functional Mailbox. The address is MEPRS Functional Mailbox. The address can be found in your address book in email. The Mailbox was established in our continuing effort to serve you more efficiently. By sending a message to the Mailbox, the problem is directed to the person best suited to answer. This should be an improvement over the former scattershot approach of sending a message to everyone, whereby either no one or everyone answered the question. By sending a message to a central location, you should receive a more concise, unified answer. In addition, the Mailbox curtails the old game of Blind Man's Bluff when people are out of the office.

b. Messages to the Mailbox should be answered within two days. If a message is High Importance, please flag it as such. Flagged messages will be answered soonest.

c. As most of you also know by now, there are still a few kinks to be worked out. But, as always, we are striving to improve our service to you, our sites. There are a few Mailbox rules:

(1) Do not put discussion items or comments in the Mailbox. That is why we set up the Discussion Board for you.

(2) Mark as High Importance those questions that need a response immediately.

(3) Please be patient. The MEPRS Program Office is always busy, as are all MEPRS offices. We are doing our best to help you do your best.

## 3. USEFUL WEB ADDRESSES.

The MEPRS website: <http://www.meprs.amedd.army.mil/>

DMHRS: <http://www.dmhrs.meprs.amedd.army.mil>

The 6010.13 can be found at this address:

<http://www-nmimc.med.navy.mil/meprs/dod6010.13m/Imepr-2.html>

**NOTE:** If your MEPRS OFFICE does not have access to the world wide web please contact us so that we can make arrangements for you have it installed.

## SECTION V: PROBLEMS SOLVED

1. REIMBURSABLES. Review your ACHFMS Adjusted Year-To-Date file. Identify the dollar amounts that have been identified with an "A" for Automatic. If these amounts are listed as a Credit, add them back into the same MEPRS code as a Debit. This will keep the Direct Expenses from being understated.

### 2. UCAPERS/WMSN-A

How to avoid UCAPERS/WMSN-A problems for daily and monthly WMSN-A processing:

1. Ensure that the UCAPERS/WMSN flag is set to YES on the Site Unique Table Maintenance screen. The Site Unique Table Maintenance screen may be reached by first selecting Option 13, Local Tables, from the System Menu and then selecting Option 11, Site Unique Table, from the Local Table Maintenance submenu. NOTE: If you are a site that does not employ WMSN, please ensure that the UCAPERS/WMSN flag is set to NO.
2. Ensure that a valid time, in 24-hour format, is entered on the WMSN Batch Cycle Maintenance screen. The WMSN Batch Cycle Maintenance screen may be reached by first selecting Option 19, WMSN, from the System Menu and then selecting Option 4, WMSN Batch Cycle Maintenance. A maximum of three daily WMSN Batch Cycles may be scheduled. Entering a time of 9999 in all three Batch Cycle Time fields indicates that no daily WMSN Batch Cycles are scheduled. NOTE: Only enter 9999 in the Batch Cycle Time fields if you are a site that does not employ WMSN.
3. Once the above steps have been accomplished, the user may verify that a Daily WMSN Cycle is scheduled by visually inspecting the Report Request screen. The Report Request screen may be reached by selecting Option 15, Report Request, from the System Menu. The WMSN (Daily) field should contain the letter 'P' indicating that it is approved for processing.
4. Upon successful completion of a Daily WMSN Cycle the following reports are generated: The Daily WMSN Ward Report, the Daily WMSN Section Report, the Daily WMSN Facility Report, the Daily ICU Hours of Service Report, the AQCESS Successful Transfer Report, and the AQCESS Transfer Error Report (only if an error had occurred).
5. In addition to the above reports, the WMSN Log is also produced. This log must be carefully reviewed every day as it contains messages to the successful or non-successful completion of the associated WMSN processes. Specific attention should be taken

to the following warning message: WARNING WMSN CYCLE BEHIND!!! This is a reminder to the site that they are behind in their processing and that the Monthly WMSN process should be requested. This message will appear every day in the WMSN Log for two weeks. If the Monthly WMSN process is not run prior to the end of the two weeks, then the Daily WMSN Cycles will be stopped. At that time, the following message will be displayed in the WMSN Log: WMSN DAILY CYCLES STOPPED. NOTE: Non-execution of the Daily WMSN Cycles will result in the loss of patient acuity data.

6. Prior to approving the Monthly WMSN Cycle for processing, the user must ensure that the schedules for the month requested have been summarized. This may be verified on the Process Status Display screen. This screen will identify for which week schedules have been summarized as well as the date and time of execution of the Last Daily WMSN Cycle. Pay particular attention to the date reflected in the Last Daily WMSN Cycle field. Under normal operations, this date should be updated every day after the execution of a Daily WMSN Cycle. This is another indicator of whether your Daily WMSN Cycles are running. This date should be no more than one day behind today's date. If it is more than a day behind, then the site has lost patient acuity data for the days that the cycle was not running.
7. The Process Status Display screen also displays the Current WMSN Reporting Month. It is imperative that the site fall not more than one month behind in its Monthly WMSN processing as this will cease the execution of the Daily WMSN Cycles. For example, if the Current WMSN Reporting Month is February, then in the absence of any Monthly WMSN processing, the Daily WMSN Cycles will stop running on the 1<sup>st</sup> of April.

1. MEFES.EXE PROGRAM ( Reads the tqfavk.txt file from the OPLOC)

This mefes.exe program takes the raw tqfavk.txt file that you receive from the OPLOC and allows you to format it in EXCEL and sort to your liking.

Here is how you use it.

1. Set up directory on your PC. Put the MEPERS.exe file in it.
2. Do a file transfer from your EAS box - need IP address. When asked for user name: key in stanfile, password: meprsl. This will give you access to the stanfins files. Transfer the file that you want to your new directory.
3. Have the raw TQFAVK file (example 7474180998.txt). Have MEFES.EXE in the same directory.

4. GO to DOS prompt, Change directory to your new file name.  
Type: MEFES.EXE filename.txt New Filename.txt [Hit Return] You should then have two files: one original input TQFAVK and another whatever name you choose: New Filename.txt
5. Import New Filename.txt into Excel. Remove "delimiter = Tab" default button. Activate "delimiter = | (pipe sign - located on the \ key), then follow next/finish boxes at bottom of screen. Result will be a Spreadsheet which has nice, clear, delimited, no Cobol Signed numbers.
6. For Auditing/Reconciliation purposes, one can compare: What is on the TQFAVK with what is in the STANFINS Pure Rpt. Did something get left out?
7. You can Separate EORs by Object Classes (1st 2 positions of the EOR) and match to 1st 2 positions of the SEEC. Should = (except for Civ Pay/Benes/MILPAY/ResvPay).
8. You can compare AMSCO totals with PEC totals. Delete 2nd, 7th & 8th positions of the AMSCO = PEC. Should Equal (after removing Civ Pay, Benes, Mil Pay etc). Also, when you finish MEPRS, the PEC totals (nonlabor) should =. The SEEC totals (nonlabor) should =.
9. Don't forget: STANFINS Civ Pay will = DCPS Input + Unresolved MODS. Also, you have Civ Pay by PEC/SEEC in MEPRS by STANFINS TQFAVK Input AND by 848888 and 25GH so you need to make sure you keep all the apples, oranges, etc., separate.
10. If nothing else, practice converting the TQFAVK raw file into a spreadsheet via MEFES. You will need to be able to do this soon and teach your people to also.
11. If you do not have this file, please contact us and we will send it to you.

## SECTION VI: QUESTIONS ANSWERED

### 1. EKG (DDAA)

A question was submitted concerning Treadmill Stress Testing (GTX). The test is performed in the EKG Clinic (DDAA), but also includes the presence of a clinician. The test normally takes 40-60 minutes, and 35-40 tests are administered each month. Because this is the most expensive and labor intensive examination provided by the EKG Workcenter, it is essential that it be properly reported in MEPRS.

The DDAA clinic location is used to schedule patients, but a clinician is also involved in the process, both in overseeing the test and in interpreting the results and arranging follow-up.

In this scenario, it is our guidance that the clinician charges his time to his own workcenter, and counts a visit to that workcenter. The technician's time and the procedure count remain in DDAA charged to the clinic collecting the visit. There is neither just an ancillary count nor is it just a visit count. The appropriate location ID for the GTX function is DDAA, with the clinician's appearance being for the convenience of the patient.

### 2. ON-CALL HOURS

The definition of "on-call" time has raised many questions. This is complicated by the fact that there are two types of "on call" - at home and in the hospital. "At home" has been defined as "not physically at the work location." "In hospital" refers to time a provider is working in one clinic while on call to another.

"At home" time is rolled up as nonavailable. The providers worry that this misrepresents their work time. Providers who are on call "in hospital" would like to record their time at both clinics, but this would overstate hours. A provider who works a 16-hour shift while also on call to another clinic would add up to more than 24 hours, which the computer can not accept.

The definition in the exception code list for C - On Call is: Time that a person is not actually working, but is required to be accessible to the hospital in case of an emergency. This time does show up as nonavailable on the reports; however, these hours do not get included in the nonavailable time reported in the FTE file. When the providers are called in to work, those hours are then reported as available time.

We do not account for the time that an individual is on call to another work center while actually performing work in his primary work center. UCAPERS cannot record two different time types for the exact same time period.



### 3. ADVICE NURSE LINE

This office wants to unify the reporting of workload for Advice Nurses. This has been difficult, as everyone seems to have a different definition for this function. In addition, some facilities use Triage and Advice Nurse interchangeably.

Unfortunately, there is no definition given for "Advice Nurse" in the DoD Glossary of Healthcare Terminology. The definition for Triage Nurse is given as: The evaluation and classification of casualties for purposes of treatment and evacuation. It consists of sorting patients according to type and seriousness of injury and the establishment of priority for treatment and evacuation.

The guidance from this office is that there is no visit count for Triage, and that you can only count a visit for an Advice Nurse if the criteria established in DoD 6010-13M is met. The Uniform Business Utility (UBU) has drafted a change to the visit definition that could make some items such as Advice Nurse visits an "Occasion of Service." We will provide further guidance when and if the UBU's recommendations are approved. For now, when a visit count is appropriate, we recommend coding for the Advice Nurse either in Family Practice or Primary Care.

### 4. STEPDOWN FROM "E"

Some time ago the question was raised as to the correct step-down of the "E" accounts. An informal decision was made by the three services to change the step-down of Logistics. However, the DoD 6010.13 has never incorporated that change. Therefore, the step-down of the "E" accounts will remain as required by the DoD 6010.13. The step-down sequence is listed in the 1998 Helpful Hints, Appendix B.

### 5. WORKLOAD REPORT

Every day, the MEPRS Program Office runs a Site Transmission Report, then runs a Workload Report on each site that has transmitted that day. This report is then filtered and sent to the pertinent sites. However, there seems to be some confusion as to the purpose of this report.

The Workload Report is filtered to show out-of-balance workcenters. This filtering shows either Workload with No Expense, or Expense with No Workload. The Report is run for A, B, and D codes. Cost Pool Accounts are filtered out. The report has five worksheets: Zero Inpatient Workload with Expense, Inpatient Workload with Zero Expense, Zero Ambulatory Workload with Expense,

Ambulatory Workload with Zero Expense, and Zero Ancillary Workload.

When the sites receive the report, they should check to see if their site appears. If the site appears, they need to check if the discrepancy is legitimate. Sometimes a discrepancy can appear because of mis-keying or other data entry problems. However, sometimes these discrepancies are legitimate. If the discrepancy is legitimate, nothing further needs to be done. If the discrepancy is not legitimate, then the site needs to track down the problem.

**EAS IV DEPLOYMENT SUMMARY  
(TENTATIVE)**

Task_Name	Start_Date	Finish_Date
EAS IV Deployment	2-Aug-99	9-Mar-01
<b>Reynolds ACH - Ft Sill, OK</b>	2-Aug-99	29-Sep-99
Tech Install/System Admin Trng	13-Sep-99	17-Sep-99
Functional Training	20-Sep-99	24-Sep-99
Data Conversion	27-Sep-99	1-Oct-99
<b>Dewitt ACH - Ft. Belvoir, VA</b>	20-Sep-99	19-Nov-99
Tech Install/System Admin Trng	1-Nov-99	5-Nov-99
Functional Training	8-Nov-99	15-Nov-99
Data Conversion	16-Nov-99	19-Nov-99
<b>Eisenhower - Ft. Gordon, GA</b>	26-Nov-99	28-Jan-00
Tech Install/System Admin Trng	10-Jan-00	14-Jan-00
Functional Training	18-Jan-00	24-Jan-00
Data Conversion	25-Jan-00	28-Jan-00
<b>Guthrie Clinic - Ft. Drum, NY</b>	3-Dec-99	4-Feb-00
Tech Install/System Admin Trng	18-Jan-00	21-Jan-00
Functional Training	24-Jan-00	28-Jan-00
Data Conversion	31-Jan-00	4-Feb-00
<b>Ireland ACH - Ft. Knox, KY</b>	16-Dec-99	18-Feb-00
Tech Install/System Admin Trng	31-Jan-00	4-Feb-00
Functional Training	7-Feb-00	11-Feb-00
Data Conversion	14-Feb-00	18-Feb-00
<b>Keller ACH - West Point, NY</b>	23-Dec-99	25-Feb-00
Tech Install/System Admin Trng	7-Feb-00	11-Feb-00
Functional Training	14-Feb-00	18-Feb-00
Data Conversion	22-Feb-00	25-Feb-00
<b>Kenner ACH - Ft. Lee, VA</b>	3-Jan-00	3-Mar-00
Tech Install/System Admin Trng	14-Feb-00	18-Feb-00
Functional Training	22-Feb-00	28-Feb-00
Data Conversion	29-Feb-00	3-Mar-00
<b>Kimbrough ACH - Ft Meade, MD</b>	14-Jan-00	17-Mar-00
Tech Install/System Admin Trng	28-Feb-00	3-Mar-00
Functional Training	6-Mar-00	10-Mar-00
Data Conversion	13-Mar-00	17-Mar-00
<b>McDonald ACH - Ft. Eustis, VA</b>	24-Jan-00	24-Mar-00
Tech Install/System Admin Trng	6-Mar-00	10-Mar-00
Functional Training	13-Mar-00	17-Mar-00
Data Conversion	20-Mar-00	24-Mar-00
<b>Walter Reed AMC - Washington, DC</b>	31-Jan-00	31-Mar-00
Tech Install/System Admin Trng	13-Mar-00	17-Mar-00
Functional Training	20-Mar-00	24-Mar-00
Data Conversion	27-Mar-00	31-Mar-00
<b>Womack (WAMC) - Ft. Bragg, NC</b>	14-Feb-00	14-Apr-00
Tech Install/System Admin Trng	27-Mar-00	31-Mar-00
Functional Training	3-Apr-00	7-Apr-00
Data Conversion	10-Apr-00	14-Apr-00
<b>Bliss ACH - Ft. Huachuca, AZ</b>	22-Feb-00	21-Apr-00

Tech Install/System Admin Trng	3-Apr-00	7-Apr-00
Functional Training	10-Apr-00	14-Apr-00
Data Conversion	17-Apr-00	21-Apr-00
<b>Weed ACH - Ft. Irwin, CA</b>	29-Feb-00	28-Apr-00
Tech Install/System Admin Trng	10-Apr-00	14-Apr-00
Functional Training	17-Apr-00	21-Apr-00
Data Conversion	24-Apr-00	28-Apr-00
<b>William Beaumont (WBAMC) - Ft. Bliss, TX</b>	21-Mar-00	19-May-00
Tech Install/System Admin Trng	1-May-00	5-May-00
Functional Training	8-May-00	12-May-00
Data Conversion	15-May-00	19-May-00
<b>Blanchfield ACH - Ft. Campbell, KY</b>	28-Mar-00	26-May-00
Tech Install/System Admin Trng	8-May-00	12-May-00
Functional Training	15-May-00	19-May-00
Data Conversion	22-May-00	26-May-00
<b>Fox ACH - Redstone Arsenal, AL</b>	24-Apr-00	23-Jun-00
Tech Install/System Admin Trng	5-Jun-00	9-Jun-00
Functional Training	12-Jun-00	16-Jun-00
Data Conversion	19-Jun-00	23-Jun-00
<b>Lyster ACH - Ft. Rucker, AL</b>	1-May-00	30-Jun-00
Tech Install/System Admin Trng	12-Jun-00	16-Jun-00
Functional Training	19-Jun-00	23-Jun-00
Data Conversion	26-Jun-00	30-Jun-00
<b>Martin ACH - Ft. Benning, GA</b>	26-May-00	28-Jul-00
Tech Install/System Admin Trng	10-Jul-00	14-Jul-00
Functional Training	17-Jul-00	21-Jul-00
Data Conversion	24-Jul-00	28-Jul-00
<b>Moncrief ACH - Ft. Jackson, SC</b>	5-Jun-00	4-Aug-00
Tech Install/System Admin Trng	17-Jul-00	21-Jul-00
Functional Training	24-Jul-00	28-Jul-00
Data Conversion	31-Jul-00	4-Aug-00
<b>Winn ACH - Ft. Stewart, GA</b>	19-Jun-00	18-Aug-00
Tech Install/System Admin Trng	31-Jul-00	4-Aug-00
Functional Training	7-Aug-00	11-Aug-00
Data Conversion	14-Aug-00	18-Aug-00
<b>Bayne-Jones ACH - Ft. Polk, LA</b>	26-Jun-00	25-Aug-00
Tech Install/System Admin Trng	7-Aug-00	11-Aug-00
Functional Training	14-Aug-00	18-Aug-00
Data Conversion	21-Aug-00	25-Aug-00
<b>Brooke (BAMC) - Ft. Sam Houston, TX</b>	3-Jul-00	1-Sep-00
Tech Install/System Admin Trng	14-Aug-00	18-Aug-00
Functional Training	21-Aug-00	25-Aug-00
Data Conversion	28-Aug-00	1-Sep-00
<b>Evans ACH - Ft. Carson, CO</b>	31-Jul-00	29-Sep-00
Tech Install/System Admin Trng	11-Sep-00	15-Sep-00
Functional Training	18-Sep-00	22-Sep-00
Data Conversion	25-Sep-00	29-Sep-00
<b>Irwin ACH, Ft. Riley, KS</b>	7-Aug-00	6-Oct-00
Tech Install/System Admin Trng	18-Sep-00	22-Sep-00

Functional Training	25-Sep-00	29-Sep-00
Data Conversion	2-Oct-00	6-Oct-00
<b>L. Wood ACH - Ft. Leonard Wood, MO</b>	21-Aug-00	20-Oct-00
Tech Install/System Admin Trng	2-Oct-00	6-Oct-00
Functional Training	10-Oct-00	16-Oct-00
Data Conversion	17-Oct-00	20-Oct-00
<b>Munson ACH - Ft. Leavenworth, KS</b>	28-Aug-00	27-Oct-00
Tech Install/System Admin Trng	10-Oct-00	13-Oct-00
Functional Training	16-Oct-00	20-Oct-00
Data Conversion	23-Oct-00	27-Oct-00
<b>Basset ACH - Ft. Wainwright, AK</b>	1-Sep-00	3-Nov-00
Tech Install/System Admin Trng	16-Oct-00	20-Oct-00
Functional Training	23-Oct-00	27-Oct-00
Data Conversion	30-Oct-00	3-Nov-00
<b>Madigan (MAMC) - Ft. Lewis, WA</b>	18-Sep-00	17-Nov-00
Tech Install/System Admin Trng	30-Oct-00	3-Nov-00
Functional Training	6-Nov-00	13-Nov-00
Data Conversion	14-Nov-00	17-Nov-00
<b>Pacific Regional Medical Command</b>	5-Oct-00	9-Feb-01
<b>121st Evacuation Host - Seoul</b>	5-Oct-00	26-Jan-01
Tech Install/System Admin Trng	8-Jan-01	12-Jan-01
Functional Training	16-Jan-01	22-Jan-01
Data Conversion	23-Jan-01	26-Jan-01
<b>Camp ZAMA Clinic, Japan</b>	13-Oct-00	2-Feb-01
Tech Install/System Admin Trng	16-Jan-01	19-Jan-01
Functional Training	22-Jan-01	26-Jan-01
Data Conversion	29-Jan-01	2-Feb-01
<b>Tripler (TAMC) - Ft. Shafter, HI</b>	19-Oct-00	9-Feb-01
Tech Install/System Admin Trng	22-Jan-01	26-Jan-01
Functional Training	29-Jan-01	2-Feb-01
Data Conversion	5-Feb-01	9-Feb-01
<b>Germany</b>	2-Nov-00	9-Mar-01
<b>Heidelberg</b>	2-Nov-00	23-Feb-01
Tech Install/System Admin Trng	5-Feb-01	9-Feb-01
Functional Training	12-Feb-01	16-Feb-01
Data Conversion	20-Feb-01	23-Feb-01
<b>Landstuhl</b>	9-Nov-00	2-Mar-01
Tech Install/System Admin Trng	12-Feb-01	16-Feb-01
Functional Training	20-Feb-01	26-Feb-01
Data Conversion	27-Feb-01	2-Mar-01
<b>Wurzburg</b>	17-Nov-00	9-Mar-01
Tech Install/System Admin Trng	20-Feb-01	23-Feb-01
Functional Training	26-Feb-01	2-Mar-01
Data Conversion	5-Mar-01	9-Mar-01