

PIMS V. 5.3 ADT Module User Manual Means Test Supervisor Menu

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Overview

This menu contains the options used in all aspects of Means Testing. This includes adding, completing, editing, deleting, viewing past Means Tests, referral to Adjudication, if necessary, and generating management reports containing Means Test signature statistics. This menu is locked with the DGMEANSTEST key.

Public Law 101-508 permits the VA to verify income data with the Internal Revenue Service (IRS) and Social Security Administration (SSA) for veterans receiving VA health care services whose eligibility for medical care is based on income. The income verification match (IVM) process for VHA medical facilities is centralized and performed at the IVM Center, Atlanta, GA.

With the installation of the IVM v1.0 software, all Means Tests completed since January 1, 1993 that met the following criteria were transmitted to the IVM Center. Subsequently, any Means Test added or edited is sent via a nightly background job.

- Patient is MT Copay Exempt but was neither adjudicated nor given a hardship exemption.
- Patient is MT Copay Required but has no active health insurance on file.

This information provides the IVM Center with the ability to compare the income reported to VHA by the veteran with records maintained by SSA and IRS. The IVM Center then begins verification of the cases. If applicable, the Means Test is updated and the veteran signs the revised 10-10f. The new Means Test is electronically transmitted to the field facility and automatically updated. The original Means Test conducted by the facility will be inactivated and the IVM test will become the Primary (active) test for the test date. Both the original VAMC test and verified IVM test are not editable, but may be viewed and printed.

The automatic filing of the IVM verified Means Test may change the patient's current Means Test status. If the status changes from MT Copay Exempt to MT Copay Required and the patient received medical care after the Means Test date, Means Test copayment charges for those episodes of care will automatically be created. These charges must be reviewed before being passed to Accounts Receivable.

Overview

The following is a list of the options contained in this menu and a brief description of their major function.

DELETE A MEANS TEST

This option allows deletion of Means Test data from the ANNUAL MEANS TEST file (#408.31) for specified patient(s). In order to use this option, users must hold the DG MTDELETE security key.

DELETE MEANS TEST/COPAY DEPENDENTS

This option allows holders of the DG MEANSTEST security key to delete a Means Test Dependent and/or a Copay Test Dependent without having to manually process all Means Tests on file for the specified patient. Data deleted during this process is stored in a temporary global for 10 days.

DUPLICATE DEPENDENTS REPORT

This option allows Means Test supervisors who hold the DG MEANSTEST security key to generate a report to determine which dependents could be duplicates in the PATIENT RELATION file (#408.12). In most cases, these duplicates can be corrected by using either the Delete Means Test/Copay Dependents or Merge Duplicate MT/Copay Dependents menu options.

MEANS TEST SIGNATURE REPORTS

MEANS TEST SIGNATURE SUMMARY REPORT

This option is used to help VAMCs monitor the Means Test images returned to them by the HEC.

MEANS TEST SIGNATURE DETAILED REPORT

This option is used to list those veterans at a particular site for which a signature still needs to be obtained.

MEANS TEST USER MENU

ADD A NEW MEANS TEST

This option allows adding a new Means Test for patients who require one.

ADJUDICATE A MEANS TEST

This option allows entry of final outcome of Means Tests referred to Adjudication.

Overview

COMPLETE A REQUIRED MEANS TEST

This option allows completion of Means Tests for patients in a REQUIRED status.

DOCUMENT COMMENTS ON A MEANS TEST

This option is used to add/edit/delete free-text comments on a selected Means Test.

EDIT AN EXISTING MEANS TEST

This option is used to make changes to existing Means Tests. This is the only option which allows changes to completed Means Tests.

GMT THRESHOLDS LOOKUP BY ZIP CODE

This option displays GMT threshold values for valid zip code.

HARDSHIPS

This option allows the user to grant, edit, and delete hardships for the current Means Test.

VIEW A PAST MEANS TEST

This option allows viewing of past Means Tests.

MERGE DUPLICATE MT/COPAY DEPENDENTS

This option allows holders of the DG MEANSTEST security key to merge dependents considered to be duplicates in the PATIENT RELATION file (#408.12). Data deleted during this process is stored in a temporary global for 10 days.

VIEW MEANS TEST EDITING ACTIVITY

This option provides a method of viewing specific changes made to Means Test data for a selected patient.

Delete a Means Test

The Delete a Means Test option is used to delete individual dates of Means Tests for a specified patient from the ANNUAL MEANS TEST file (#408.31). It can also be used to delete all Means Tests for a non-veteran patient.

Means Tests that have been verified by the Income Verification Match (IVM) Center and the corresponding VAMC test are uneditable and cannot be deleted. If you choose such a Means Test, the system will display a message informing you it cannot be deleted.

Deletion of a patient's most recent Means Test requires a change in Means Test status. The system automatically assigns the status corresponding to the next most recent Means Test and displays a message.

Utilizing this option only deletes the patient's Means Test record entry in the ANNUAL MEANS TEST file (#408.31). All information concerning income, assets, debts, spouse, dependent children, etc. is maintained.

Only users holding the DG MTDELETE security key may access this option.

Delete Means Test/Copay Dependents

The Delete Means Test/Copay Dependents option allows you to delete a Means Test Dependent and/or a Copay Test Dependent from the PATIENT RELATION file (#408.12) without having to manually process all Means Tests on file for the specified patient. At the “Select MT/Copay Dependent to be deleted:” prompt, enter the SSN of the patient whose Patient Relation entries you want to delete.

The software displays the selected patient’s enrollment information and prompts you to verify that this is the correct patient. YES response takes you to the “Would you like to PERMANENTLY DELETE this record? NO//” prompt; NO response returns you to the “Select MT/Copay Dependent to be deleted:” prompt.

After you verify that you want to permanently delete the duplicate record, the software confirms that the entry was successfully deleted.

You must hold the DG MEANSTEST security key to access this option.

Duplicate Dependents Report

The Duplicate Dependents Report option allows Means Test supervisors to determine which dependents could be duplicates in the PATIENT RELATION file (#408.12). In most cases, these duplicates can be corrected by using either the Delete Means Test/Copay Dependents or the Merge Duplicate MT/Copay Dependents menu options.

The following information displays when you enter this option:

```
*** DUPLICATE PATIENT RELATIONS REPORT ***
```

```
This report will search the PATIENT RELATION file (#408.12) to identify those entries where potential duplicates exist.
```

```
This report is designed for an 80 column print device or a terminal using the HOME device. The report may take a long time to generate, accordingly, it is recommended that it be queued to an 80 column print device. The P-MESSAGE device is NOT recommended for use, nor should the output format be specified at the device prompt in order to do a screen capture.
```

```
DEVICE: HOME//
```

This option generates eight (8) separate reports for the potential duplicates. The report generation will take some amount of time, based on the size of the site's database. Queuing to an 80-column print device is highly recommended. If you accept the HOME default at the "DEVICE:" prompt, your terminal will be tied up during the job run time. An asterisk (*) in the SSN column of the various reports indicates an entry in the INCOME PERSON file (#408.13) without an SSN. The reports generated are categorized as follows:

Duplicate Dependents Report

If patient is NOT DECEASED

Report Heading	Report Description
Active Duplicate Entries Category C NON-CMOR	Means Test Cat C CMOR is a site other than the facility generating the report.
Active Duplicate Entries Category C CMOR	Means Test Cat C CMOR is the site generating this report.
Active Duplicate Entries Non Category C NON-CMOR	Other Category Means Test CMOR is a site other than the facility generating the report.
Active Duplicate Entries Non Category C CMOR	Other Category Means Test CMOR is the site generating this report.

If patient is DECEASED

Please Note - No Action required in reference to the deceased reports.

Report Heading	Report Description
Deceased Patient, No Action Required Category C NON-CMOR	Means Test Cat C CMOR is a site other than the facility generating the report.
Deceased Patient, No Action Required Category C CMOR	Means Test Cat C CMOR is the site generating this report.
Deceased Patient, No Action Required Non Category C NON-CMOR	Other Category Means Test CMOR is a site other than the facility generating the report.
Deceased Patient, No Action Required Non Category C CMOR	Other Category Means Test CMOR is the site generating this report.

Duplicate Dependents Report

The report output includes the following information:

- Report title (Specific in terms of categorization outlined in the table above)
- Date/Time the report was generated
- Name of the supervisor who generated the report
- Page number
- Veteran's Name and SSN
- Dependent's SSN and name
- Dependent's date of birth
- Whether the dependent is active in the PATIENT RELATION file (#408.12) (YES or NO)
- Date on which the individual became the patient's dependent (EFF DATE)
- Type of test (Means, Copay, or UNK). UNK indicates the type of test could not be determined by the software.

You must hold the DG MEANSTEST security key to access this option.

Means Test Signature Reports

Means Test Signature Summary Report

The Means Test Signature Reports menu provides for the generation of management reports containing Means Test signature statistics. Only users holding the DG SUPERVISOR security key may access this menu.

The statistics generated by these reports will only include those veterans who have a Means Test with Status of A, C, or Pending Adjudication as these are the only MT statuses that require obtaining a signature.

The purpose of the Means Test Signature Summary Report is to help VAMCs monitor the Means Test images returned to them by the HEC. The report only shows signature indicators for Means Tests that were submitted by the **local** site (which may or may not be designated as the *primary* site). It does **NOT** take into account that the HEC may already have a signature on file for the veteran as sent from a different, primary site.

The report may be requested for the previous income year, current income year, or next income year.

The report generated will include a count of the MT signature indicators for the local site in each of the following categories.

YES	Means Test images signed by veteran
NO	Means Test images NOT signed by veteran
DELETED	Means Test signature indicators deleted by direct user edit*
NULL	A Means Test document has not been imaged

*The MT signature indicator would be deleted by direct user edit in cases where HEC assigned a value to an image and then later discovered that they had selected the wrong veteran/site/income year combination. The value "DELETED" is used in this report to track those cases wherein the indicator was entered and then later deleted due to an error being made as noted above.

Means Test Signature Reports

Means Test Signature Detail Report

The Means Test Signature Reports menu provides for the generation of management reports containing Means Test signature statistics. Only users holding the DG SUPERVISOR security key may access this menu.

The statistics generated by these reports will only include those veterans who have a Means Test with Status of A, C, or Pending Adjudication as these are the only MT statuses that require obtaining a signature.

The purpose of the Means Test Signature Detail Report is to list those veterans at a particular site for which a signature still needs to be obtained. A veteran will ONLY be listed if NEITHER the local site NOR the primary site (if different) has obtained a signature. Once a signature has been obtained by EITHER the local OR primary site (if different), the veteran will be removed from this list.

The report may be requested for the previous income year, current income year, or next income year.

The report generated will include the following information on each veteran listed: name, Social Security Number, Means Test status and Means Test Signature Indicator (see table above for key). It will also give a count of the total number of veterans in the report and of the number of Nulls, Nos, and Deleted indicators.

Means Test User Menu

Add a New Means Test

The Add a New Means Test option is used to enter a new Means Tests into the system. Only one date of test should exist for a patient annually. The following rules apply to adding a Means Test.

- the date of test cannot be before 7/1/86
- the date of test cannot be before the last date of test
- a new date of test cannot be added if one exists in the last 365 days unless it is a new calendar year

The Means Test information is based on the last calendar year and is entered through a series of screens. Based on the financial information entered and the income thresholds established, the system determines the appropriate Means Test category for the patient. If it is necessary to refer the case to adjudication, the system will prompt "Do you wish to send this case to adjudication?". If YES is entered, the veteran will be placed in MT Copay Required status until determination is returned from adjudication. If NO is entered, the system makes the final determination that the veteran is MT Copay Required.

If the veteran's Means Test status is PENDING ADJUDICATION, he/she is tentatively placed in MT Copay Required status and must agree to pay the deductible. If the veteran does not agree to pay the deductible, a message is printed in the signature block for the deductible on the 10-10F form.

Screen 1 of this option uses the List Manager utility. The List Manager is a tool designed to display a list of items. It allows you to select items from the list and perform specific actions against those items.

Screen 1 - Marital Status/Dependents is used to enter data on the veteran's spouse and dependent children. Name, social security number, sex, and date of birth must be entered for the veteran's spouse and dependent children if it has not already been filled in through registration. This information is extremely important as it is critical in determining the annual income thresholds for the veteran.

Means Test User Menu

Add a New Means Test

Spouse and dependent children income collection is dependent on several factors. The spouse's income need only be entered if the spouse lived with the veteran last calendar year or, if they did not live together, the veteran contributed at least \$600 to the spouse's support. Dependent children income is only required if the child had income which was available to the veteran last calendar year. The following is a brief explanation of some of the actions which may be taken.

DD - In order to edit the dependent demographics, the selected dependent has to be active and associated with the Means Test.

DP - Delete Dependent functionality requires that the user hold the DG DEPDELETE security key. This functionality should be mainly used to delete duplicate dependents. In order to delete a dependent, they must be removed from every Means Test (using the RE protocol).

CD - Copy Data can only be used if there is previous year income on file and no income on file for this year.

ED - Expand Dependent will move to another screen (Expand Dependent). It is used to edit the effective date (date the person became a dependent of the veteran).

Screen 2 - Previous Calendar Year Gross Income is used to enter income information such as military retirement, total employment income, and social security. Some fields may be filled in from information collected in registration. Depending on the information entered on Screen 1, this screen may appear with one column (veteran), two columns (veteran/spouse), or three columns (veteran/spouse/dependents). The required information will be prompted for each column shown. The item number(s) you select for editing may be preceded by V (veteran), S (spouse), or C (children) to select those specific fields; otherwise, the fields for all three will be displayed.

Screen 3 - Deductible Expenses is used to enter any medical, funeral/burial expenses, and children's educational expenses. A child's educational expenses can only be claimed if the child had total employment income.

Means Test User Menu

Add a New Means Test

Screen 4 - Previous Calendar Year Net Worth is used to enter such information as stocks and bonds, real property, bank accounts, and debts. Depending on the information entered on Screen 1, this screen may appear with one column (veteran) or two columns (veteran/spouse). The item number(s) you select for editing may be preceded by V (veteran) or S (spouse) to select those specific fields; otherwise, the fields for both will be displayed. The required information will be prompted for each column shown.

When adding a Means Test, completion of the test is optional; however, the marital and dependent children sections must be completed in order to complete the Means Test. For MT Copay Exempt veterans, the net worth must also be entered. If you choose not to complete the Means Test, it may be completed later through either the Complete a Required Means Test or Edit an Existing Means Test options.

You may choose to print the Financial Worksheet (VAF 10-10F) when the Means Test is completed or print the prior Means Test (if one exists) at the beginning of the option.

Access to this option is limited to holders of the DG MEANSTEST security key.

Means Test User Menu

Adjudicate a Means Test

The Adjudicate a Means Test option is used to enter the patient's Means Test category into the system when the determination is returned from Adjudication. Only patients who currently have the Means Test status of PENDING ADJUDICATION may be selected.

A patient's Means Test may be referred to Adjudication for Means Test Category determination when income alone places the veteran in MT Copay Exempt status, but income plus net worth (property) is equal to or greater than the allowable threshold.

If a change is made which involves the MT Copay Required Means Test status, a bulletin may be generated informing the user and advising review of the MT Copay Required charges for the selected patient.

Access to this option is limited to holders of the DG MEANSTEST security key.

Means Test User Menu

Complete a Required Means Test

The Complete a Required Means Test option is used to complete Means Tests generated through registration or by other circumstances. Only Means Test records with a status of REQUIRED may be completed.

The Means Test information is based on the last calendar year and is entered through a series of screens. Based on the financial information entered and the income thresholds established, the system determines the appropriate Means Test category for the patient. If it is necessary to refer the case to adjudication, the system will prompt "Do you wish to send this case to adjudication?". If YES is entered, the veteran will be placed in MT Copay Required status until determination is returned from adjudication. If NO is entered, the system makes the final determination that the veteran is MT Copay Required.

If the veteran's Means Test status is PENDING ADJUDICATION, he/she is tentatively placed in MT Copay Required status and must agree to pay the deductible. If the veteran does not agree to pay the deductible, a message is printed in the signature block for the deductible on the 10-10F.

Screen 1 of this option uses the List Manager utility. The List Manager is a tool designed to display a list of items. It allows you to select items from the list and perform specific actions against those items.

Screen 1 - Marital Status/Dependents is used to enter data on the veteran's spouse and dependent children. Name, social security number, sex, and date of birth must be entered for the veteran's spouse and dependent children if it has not already been filled in through registration. This information is extremely important as it is critical in determining the annual income thresholds for the veteran.

Spouse and dependent children income collection is dependent on several factors. The spouse's income need only be entered if the spouse lived with the veteran during the last calendar year or, if they did not live together, the veteran contributed at least \$600 to the spouse's support. Dependent children income is only required if the child had income which was available to the veteran last calendar year. The following is a brief explanation of some of the actions that may be taken.

Means Test User Menu

Complete a Required Means Test

DD - In order to edit the dependent demographics, the selected dependent has to be active and associated with the Means Test.

DP - Delete Dependent functionality requires that the user hold the DG DEPDELETE security key. This functionality should be mainly used to delete duplicate dependents. In order to delete a dependent, they must be removed from every Means Test (using the RE protocol).

CD - Copy Data can only be used if there is previous year income on file and no income on file for this year.

ED - Expand Dependent will move to another screen (Expand Dependent). It is used to edit the effective date (date the person became a dependent of the veteran).

Screen 2 - Previous Calendar Year Gross Income is used to enter income information such as military retirement, total employment income, and social security. Some fields may be filled in from the information collected in registration. Depending on the information entered on Screen 1, this screen may appear with one column (veteran), two columns (veteran/spouse), or three columns (veteran/spouse/dependents). The item number(s) you select for editing may be preceded by V (veteran), S (spouse), or C (children) to select those specific fields; otherwise, the fields for all three will be displayed. The required information will be prompted for each column shown.

Screen 3 - Deductible Expenses is used to enter any medical, funeral/burial expenses, and children's educational expenses. A child's educational expenses can only be claimed if the child had total employment income available.

Screen 4 - Previous Calendar Year Net Worth is used to enter such information as stocks and bonds, real property, bank accounts, and debts. Depending on the information entered on Screen 1, this screen may appear with one column (veteran) or two columns (veteran/spouse). The item number(s) you select for editing may be preceded by V (veteran) or S (spouse) to select those specific fields; otherwise, the fields for both will be displayed. The required information will be prompted for each column shown.

Means Test User Menu
Complete a Required Means Test

Completion of the Means Test through this option is mandatory. The Means Test status will automatically be updated once editing is complete.

You may choose to print the VAF 10-10F, Financial Worksheet, when the Means Test is completed.

Means Test User Menu

Document Comments on a Means Test

The Document Comments on a Means Test option is used to add/edit/delete comments to an existing Means Test. This allows the user to enter any pertinent information concerning the selected Means Test such as efforts made to obtain Means Test information.

You will be prompted for the patient name and the Means Test date. The latest Means Test date will appear as the default. A question mark (?) may be entered to obtain a list of Means Test dates for that patient. Comments may then be added through a word-processing field. Existing comments can be edited or deleted.

Means Test User Menu

Edit an Existing Means Test

The Edit an Existing Means Test option is used to make changes to data in existing Means Tests. It may also be used to complete Means Tests on patients identified through Registration as requiring Means Testing. Only the latest Means Test may be edited. A Means Test that has been verified by the Income Verification Match (IVM) Center and its corresponding original VAMC Means Test are both uneditable. If you choose such a Means Test, the system will display a message containing this information. However, this option will let you view or print such a test.

The Edit an Existing Means Test option operates similarly to the Add a New Means Test and Complete a Required Means Test options; however, it is the only option which allows changes to completed Means Tests. After these changes are entered, the system redetermines the patient's Means Test category and changes it, if necessary. If additional information is needed to make a determination or if it is necessary to refer the case to adjudication, the system prompts accordingly.

The date(s) and name(s) of individual(s) making changes is recorded by the system and may be seen through the View Means Test Editing Activity option.

A Means Test is required under the following conditions.

- primary eligibility is NSC or 0% service-connected non-compensable
- does not receive disability retirement from the military
- is not eligible for Medicaid
- is not on a domiciliary ward
- has not been Means Tested in the past year

Should these criteria change (excluding the last two), a Means Test status of NO LONGER REQUIRED will be assigned to the Means Test. Tests with this status cannot be edited.

Depending on the information entered on Screen 1, Screen 2 may appear with one column - veteran; two columns - veteran/spouse; or three columns - veteran/spouse/dependents. The item number(s) you select for editing may be preceded by V (veteran), S (spouse), or C (children) to select those specific fields; otherwise, the fields for all three will be displayed.

Means Test User Menu

Edit an Existing Means Test

Screen 4 may appear with one or two columns. The item number(s) you select for editing may be preceded by V (veteran) or S (spouse) to select those specific fields; otherwise, the fields for both will be displayed. The required information will be prompted for each column shown.

Screen 1 of this option uses the List Manager utility. The List Manager is a tool designed to display a list of items. It allows you to select items from the list and perform specific actions against those items.

You may print the VAF 10-10F, Financial Worksheet, when the Means Test is complete.

Access to this option is limited to holders of the DG MEANSTEST security key.

Means Test User Menu GMT Thresholds Lookup by ZIP Code

On January 23, 2002, President Bush signed into law H.R. 3477, The Department of Veterans Affairs Health Care Programs Enhancement Act of 2001. Section 202 of this Act requires the implementation of U.S. Department of Housing and Urban Development (HUD) Indices to determine geographic income thresholds in support of more discrete means testing. A new GMT copayment status identifies veterans who qualify for a reduced inpatient copayment rate. The effective date of the regulation to support this legislation is October 1, 2002. Like traditional Means Test thresholds, the GMT Thresholds will be applied in a retrospective manner (i.e., HUD Indices published in Calendar Year 2002 will be used for Means Tests performed in Calendar Year 2003). Information about HUD income limits is available on the Data Sets Page of the HUD User Web Site at <http://www.huduser.org/datasets/il.html>.

The GMT Thresholds will be uploaded into **VISTA** annually, along with the traditional means test threshold values, in a patch released in December of each year. They will be activated on January 1st of each year. The indices from previous years will be stored indefinitely in both **VISTA** and HEC systems. For information about the implementation of HUD Indices, refer to the GMT Installation Guide and GMT Technical Manual.

The GMT software provides the following functionality:

- Automatically populates City, State, and County fields of the Patient Demographics Screen when ZIP Code is entered during patient registration or edit of patient demographic data (load/edit)
- State and County fields can only be edited by users who hold the EAS GMT COUNTY EDIT security key
- Automatically updates address changes sent from the HEC
- A conversion of veterans based on their existing financial assessment information will be run at the HEC. An ongoing process assigns veterans to the appropriate medical care copayment and enrollment priority group upon completion of a financial assessment.
- NSC and noncompensable 0% SC veterans with current income above the MT Threshold and below the applicable GMT Threshold will be placed in the new Means Test status, "GMT Copayment Required". These veterans will be assigned to Enrollment Priority Group 7 (unless Catastrophically Disabled [CD] or exposed to Agent Orange, Ionizing Radiation, or Environmental Contaminants). Veterans who are in GMT Copay Required status must submit income for yearly testing.

Means Test User Menu GMT Thresholds Lookup by ZIP Code

- Veterans who are subject to the full inpatient medical care copayment and placed in the new Enrollment Priority Group 8 (unless CD or exposed to toxic substances) include:
 - Veterans with income greater than the GMT threshold
 - Veterans declining to provide income info
 - Veterans with income greater than the MT threshold who live in an area where the GMT threshold is less than or equal to the MT threshold
 - Veterans with income above the MT threshold whose income info is over one year old at the time the GMT software is installed
- Although this does not affect the GMT functionality, all user viewable references to Category A and Category C means test statuses in enrollment-related software have been modified to reflect the following changes:
 - Category A (Cat A) is now MT Copay Exempt
 - Category C (Cat C) is now MT Copay Required
- A variety of reports and data screens have been modified to display Enrollment Priority Group 8 and GMT Copayment Required status.
- Provides a new user option, GMT Thresholds Lookup by ZIP Code, which displays GMT Threshold values for a valid user-specified ZIP Code
- Adds a new field, "Hardship Reason", to the Hardship Determinations Screen.

The GMT Thresholds Lookup by ZIP Code option is used to display GMT Threshold values for a valid Postal Code (a.k.a. ZIP Code). The only user prompt is "ZIP Code:", and a response is required. You must enter a ZIP Code or a city name to generate an output, or a caret (^) to return to the menu. If you enter a city name and the software finds multiple cities with the same name, it returns a list of the cities with their corresponding ZIP Codes from which you can make your selection.

The software returns the following information for a valid ZIP Code:

- ZIP Code
- County Name
- State
- Income year in which the GMT Thresholds apply
- Federal Information Processing Standard (FIPS) [County] Code
- Number of family members in household
- GMT Threshold dollar amounts for up to eight members in household
- Family size adjustments information for all income limits
- The formula for determining GMT Threshold dollar amounts for households with more than eight family members

Means Test User Menu Hardships

This option replaces the Change a Patient's Means Test Category option. It allows users to grant, edit, and delete hardships for the current Means Test.

Hardship Determinations continue to be the responsibility of the VAMCs; however, they will be sent to the HEC and distributed nationally along with the Primary Means Test to all VAMCs that the veteran has visited. Once granted, a Hardship is in effect until a new Means Test is required. The VAMC that granted the hardship will retain the original Means Test Status when the status changes. For example, if a Hardship determination changes the original status from MT Copay Required to MT Copay Exempt, the new status (Exempt) is stored as the Means Test status. The original status (MT Copay Required) is then stored as Test Determined Status.

After the GMT conversion runs at the HEC, if a veteran's Means Test status is MT Copay Required, the user is prompted to enter the status (GMT Copay Required or MT Copay Exempt) and a Hardship Reason.

The Hardship Determinations screen provides the following List Manager actions.

Grant Hardship

Allows you to grant hardships for current Means Tests for the selected patient. Prompts for Hardship Effective Date and Hardship Review Date. Once granted, a hardship remains in effect until a new Means Test is required.

Edit Hardship

Allows you to edit hardships for current Means Tests for the selected patient. Prompts for Hardship Effective Date and Hardship Review Date. Only the VAMC that determines the hardship can edit or delete it.

Delete Hardship

Allows you to delete hardships for current Means Tests for the selected patient. Only the VAMC that determines the hardship can edit or delete it. When a hardship is deleted, no record of it is retained in the database.

Edit Comments

Allows you to add, edit, and delete comments related to hardships for current Means Tests for the selected patient.

Access to this option is limited to holders of the DG MEANSTEST security key.

Means Test User Menu

View a Past Means Test

The View a Past Means Test option is used to view past Means Tests data. The option does not allow editing. You will be prompted for the patient's name and the date of the Means Test you wish to view. Double question marks (??) entered at the date prompt will provide you with a list of the patient's Means Test dates from which to choose.

If certain circumstances exist for the selected patient, messages may be displayed. A message will be printed if no detailed income information is on file for the veteran, or if the veteran's Means Test status is NO LONGER REQUIRED. Since income data can be entered/edited through registration, once a Means Test has this status, the income data being viewed may differ from that originally entered as part of the Means Test.

You will be able to view the following four Means Test screens through this option.

- Screen 1 Marital Status/Dependents
- Screen 2 Previous Calendar Year Gross Income
- Screen 3 Deductible Expenses
- Screen 4 Previous Calendar Year Net Worth

The option may display the dependent totals **not** converted. Totals not converted will only be displayed under the following conditions.

- Converted totals exist and Means Test income is 0 or greater
- For a spouse - the veteran is married but detailed income information is not available
- For dependent children - the veteran has dependent children but detailed income information is not available

In other words, the Means Test has not been edited under the new 1010F rules with spouse or dependent children information added.

Merge Duplicate MT/Copay Dependents

You might want to use the Duplicate Dependents Report option to generate a report of potential duplicate entries in the PATIENT RELATION file (#408.12) before using this option.

The Merge Duplicate MT/Copay Dependents option is used to merge dependents considered to be duplicates in the PATIENT RELATION file (#408.12). The software prompts you to select a Patient SSN. Enter the SSN for the duplicate dependent whose data you want to merge. The software searches for entries in the PATIENT file (#2) and the PATIENT RELATION file (#408.12), and displays the results.

The software determines what patient you must use to merge the duplicate dependent information, and asks if you'd like to continue with the merge. YES response merges the data into the original entry, and deletes the duplicate entry. The software confirms that the merge was successful. NO response returns you to the "Select Patient SSN:" prompt. Data deleted during this process is stored in a temporary global for 10 days.

You must hold the DG MEANSTEST security key to access this option.

View Means Test Editing Activity

The View Means Test Editing Activity option provides a method of viewing changes made to Means Test data. If the selected patient has more than one Means Test on file, they will be listed for selection.

The computer keeps track, by patient, each time any change is made to the Means Test data either through Means Test or Registration. The types of changes that are captured are shown below. Both the old and new status value will be shown on the report.

- Add New Means Test
- Adjudicate Means Test
- Means Test Category Change
- Edit Existing Means Test Info
- Means Test Status Change
- Primary Means Test Change

The output generated by this option will include the following information: patient name, Means Test date, date of change, type of change, and the user who made the change. The time will appear along with the date of change if it was part of the original entry.

If no changes have been made to the selected Means Test, the output will state that fact.

You must hold the DG MEANSTEST security key to access this option.