Eligibility and Enrollment (E&E)

Veterans Health Information Systems and Technology Architecture (VistA)
Registration, Eligibility & Enrollment (REE)

DG\*5.3\*1081

Release Notes



September 2022

Department of Veterans Affairs (VA)

Office of Information and Technology (OIT)

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# Introduction

Veterans Health Information Systems and Technology Architecture (VistA) Registration, Eligibility & Enrollment (REE) patch DG\*5.3\*1081 is being released to support enhancements for the Eligibility and Enrollment (E&E) program.

Patch DG\*5.3\*1081 is also being released in support of the Veterans Health Administration (VHA) Enrollment System (VES) 6.2 release. Refer to Informational Patch EAS\*1\*216 (Enrollment Application System) for additional details regarding the VES release.

# Purpose

The Release Notes cover the changes to VistA REE for this release.

# Audience

This document targets users and administrators of VistA REE and applies to the changes made between this release and any previous release for this software.

# This Release

This software is being released as a patch (PackMan) message. The PackMan message includes the DG\*5.3\*1081 patch.

The following sections provide a summary of the enhancements and modifications to the existing software for VistA REE with the release of patch DG\*5.3\*1081.

## New Features and Functions Added

There are no new features or functions added to VistA REE for DG\*5.3\*1081.

## Enhancements and Modifications

Table 1 shows the enhancements and modifications included in the DG\*5.3\*1081 release as tracked in Atlassian Jira.

Table 1: DG\*5.3\*1081 Enhancements and Modifications

| **Jira Epic #** | **Summary** |
| --- | --- |
| VES-12473 | Standardize List of Ineligible Reasons and Add Rules (VistA) |
| VES-17491 | Update Rules for Not Eligible Reasons (VistA) |
| VES-22339 | HUD-VASH Phase 2: Update "Expanded MH Care" Rule (VistA) |
| VES-22480 | Update VHAP Descriptions (VistA) |

Patch DG\*5.3\*1081 modifies the INELIGIBLE/MISSING DATA, SCREEN <10> screen to set DATA GROUP [1] to UNEDITABLE and removes the TWX Source, TWX City, TWX State and VARO Decision prompts.

Patch DG\*5.3\*1081 modifies the VHA Profile (VHAP) LONG DESCRIPTION of VETERAN RESTRICTED MED BENEFITS, NON VETERAN OTHER RESTRICTED MED BENEFITS, RESTRICTED EXAMINATION ONLY, HUMANITARIAN, APPLICANT IN PROCESS and INELIGIBLE entries in the HEALTH BENEFIT PLAN file (#25.11).

Patch DG\*5.3\*1081 adds a new entry to the VistA MAS ELIGIBILITY CODE file (#8.1).

Patch DG\*5.3\*1081 adds a new entry to the VistA ELIGIBILITY CODE file (#8).

Patch DG\*5.3\*1081 updates the descriptions of the INELIGIBLE DATE (#.152), INELIGIBLE TWX SOURCE (#.1651), INELIGIBLE TWX CITY (#.1653), INELIGIBLE TWX STATE (#.1654), INELIGIBLE VARO DECISION (#.1656) and INELIGIBLE REASON (#.307) fields of the PATIENT file (#2).

Patch DG\*5.3\*1081 removes the 15-INEL REASON UNSPECIFIED inconsistent data element, of the INCONSISTENT DATA ELEMENTS file (#38.6), from consistency check processing.

Patch DG\*5.3\*1081 sets the INELIGIBLE DATE (#.152), INELIGIBLE TWX SOURCE (#.1651), INELIGIBLE TWX CITY (#.1653), INELIGIBLE TWX STATE (#.1654), INELIGIBLE VARO DECISION (#.1656) and INELIGIBLE REASON (#.307) fields of the PATIENT file (#2) to UNEDITABLE.

Patch DG\*5.3\*1081 modifies the entry of the Primary Eligibility Code on the ELIGIBILITY STATUS DATA, SCREEN <7> screen. If the INELIGIBLE DATE field (#.152) of the PATIENT file (#2) is populated, then the EXPANDED MH CARE NON-ENROLLEE eligibility code is not valid as the Primary Eligibility Code for the patient.

**List of Updates**

This patch makes the following enhancements to VistA REE:

**SECTION 1: DATA DICTIONARY UPDATES**

1. The CLINICAL EVALUATION eligibility code is added to the MAS ELIGIBILITY CODE (#8.1) file. This entry is provided in the build file and installed with the patch:

 NUMBER: 27 NAME: CLINICAL EVALUATION

 CARD COLOR: RED ABBREVIATION: CE

 VA CODE NUMBER: 14 TYPE: NON-VETERAN

 PRINT NAME: CLINICAL EVALUATION SELECT AS ADDITIONAL: YES

1. The CLINICAL EVALUATION eligibility code is added to the ELIGIBILITY CODE (#8) file. This entry is added to the file by the post install Routine POST^DG531081P.

NAME: CLINICAL EVALUATION CARD COLOR: RED

 ABBREVIATION: CE VA CODE NUMBER: 14

 TYPE: NON-VETERAN PRINT NAME: CLINICAL EVALUATION

 SELECT AS ADDITIONAL: YES

 MAS ELIGIBILITY CODE: CLINICAL EVALUATION

 ID FORMAT: VA STANDARD AGENCY: VA

 MAKE RECORD SENSITIVE?: NO

1. The USE FOR Z07 CHECK field (#6) of the INCONSISTENT DATA ELEMENTS file (#38.6) for the INEL REASON UNSPECIFIED entry (#15) is set to NO:

NUMBER: 15 NAME: INEL REASON UNSPECIFIED

 TEXT: 'INELIGIBLE REASON' UNSPECIFIED FOR INELIGIBLE APPLICANT

 KEY REQUIRED: KEY ALWAYS REQUIRED SET ELIG DR STRING: NO

 CHECK/DON'T CHECK: CHECK USE FOR Z07 CHECK: NO

 DESCRIPTION: Inconsistency results if an 'INELIGIBLE DATE' is entered

 but no 'INELIGIBLE REASON' is specified.

1. Two (2) fields are updated in the PATIENT file (#2). The fields are made UNEDITABLE and the DESCRIPTION is updated to indicate these are no longer editable:

DATA NAME GLOBAL DATA

ELEMENT TITLE LOCATION TYPE

--------------------------------------------------------------------------

2,.152 INELIGIBLE DATE .15;2 DATE

 INPUT TRANSFORM: S %DT="EP",%DT(0)=-DT D ^%DT K %DT S X=Y K

 :Y<1 X I $D(X) D EK^DGLOCK I $D(X) S DFN=D

 A D INEL^DGLOCK

 LAST EDITED: JUN 13, 2022

 HELP-PROMPT: The Ineligible Date cannot be prior to the

 beneficiary Date of Birth. Enter the date

 this patient was identified as being

 ineligible for treatment.

 DESCRIPTION: \*\*DG\*5.3\*1081 removed the ability to edit

 this field. All edits must now be made in

 the VHA Enrollment System.\*\*

 If this applicant is ineligible for

 treatment enter the effective date. Only

 users who hold the designated security key

 may enter/edit this field. The Ineligible

 Date cannot be prior to the beneficiary

 Date of Birth.

 DELETE TEST: 1,0)= D EK^DGLOCK I '$D(X)

 WRITE AUTHORITY: ^

 GROUP: IPT

 UNEDITABLE

 NOTES: XXXX--CAN'T BE ALTERED EXCEPT BY

 PROGRAMMER

 CROSS-REFERENCE: ^^TRIGGER^2^.091

 1)= K DIV S DIV=X,D0=DA,DIV(0)=D0 S Y(1)=$

 S($D(^DPT(D0,0)):^(0),1:"") S X=$P(Y(1),U,

 10),X=X S DIU=X K Y S X=DIV S X=DIU\_"\*\*INE

 LIGIBLE\*\*" S DIH=$G(^DPT(DIV(0),0)),DIV=X

 S $P(^(0),U,10)=DIV,DIH=2,DIG=.091 D ^DICR

 2)= K DIV S DIV=X,D0=DA,DIV(0)=D0 S Y(1)=$

 S($D(^DPT(D0,0)):^(0),1:"") S X=$P(Y(1),U,

 10),X=X S DIU=X K Y S X=DIV X ^DD(2,.152,1

 ,1,59.2) S X=$P(Y(4),Y(5),Y(6),X) S Y=X,X=

 Y(3),X=X\_Y X ^DD(2,.152,1,1,2.4)

 2.4)= S DIH=$G(^DPT(DIV(0),0)),DIV=X S $P(

 ^(0),U,10)=DIV,DIH=2,DIG=.091 D ^DICR

 59.2)= S X=DIU,Y(1)=$G(X) S X="\*\*INELIGIBL

 E\*\*",Y(2)=$G(X) S X=1,X=$P(Y(1),Y(2),X),Y(

 3)=$G(X) S X=DIU,Y(4)=$G(X) S X="\*\*INELIGI

 BLE\*\*",Y(5)=$G(X) S X=2,Y(6)=$G(X) S X=99

 CREATE VALUE)= REMARKS\_"\*\*INELIGIBLE\*\*"

 DELETE VALUE)= $P(REMARKS,"\*\*INELIGIBLE\*\*"

 ,1)\_$P(REMARKS,"\*\*INELIGIBLE\*\*",2,99)

 FIELD)= REMARKS

 CROSS-REFERENCE: 2^AENR152^MUMPS

 1)= D AUTOUPD^DGENA2(DA)

 2)= D AUTOUPD^DGENA2(DA,2)

 3)= DO NOT DELETE

 This cross-reference is used to notify

 HEC of changes that may affect enrollment.

 CROSS-REFERENCE: 2^AXR7^MUMPS

 1)= Q

 2)= S DGXRF=.152 D ^DGDDC Q

2,.307 INELIGIBLE REASON .3;7 FREE TEXT

 REASON-INELIGIBLE

 INPUT TRANSFORM: K:$L(X)>40!($L(X)<1) X I $D(X) D EK^DGLOCK

 LAST EDITED: JUN 13, 2022

 HELP-PROMPT: Enter the reason this patient is

 considered to be ineligible for treatment

 NTE 40 characters.

 DESCRIPTION: \*\*DG\*5.3\*1081 removed the ability to edit

 this field. All edits must now be made in

 the VHA Enrollment System.\*\*

 If this applicant is ineligible for

 treatment enter the reason [not to exceed

 40 characters]. An ineligible date must

 be specified in order to enter/edit this

 field and the user must hold the

 designated security key. This field may

 not be deleted as long as an ineligible

 date is on file.

 DELETE TEST: 1,0)= D EK^DGLOCK I '$D(X)

 WRITE AUTHORITY: ^

 GROUP: IPT

 UNEDITABLE

 NOTES: XXXX--CAN'T BE ALTERED EXCEPT BY

 PROGRAMMER

 CROSS-REFERENCE: 2^AENR307^MUMPS

 1)= D EVENT^IVMPLOG(DA)

 2)= D EVENT^IVMPLOG(DA)

 3)= DO NOT DELETE

 This cross-reference is used to notify HEC

 of changes that may affect enrollment.

1. Four (4) fields are updated in the PATIENT file (#2). The fields are made UNEDITABLE and the DESCRIPTION is updated to indicate these fields are obsolete:

DATA NAME GLOBAL DATA

ELEMENT TITLE LOCATION TYPE

--------------------------------------------------------------------------

2,.1651 INELIGIBLE TWX SOURCE INE;1 SET (Required)

 TWX SOURCE-INELIGIBLE

 '1' FOR VAMC;

 '2' FOR REGIONAL OFFICE;

 '3' FOR RPC;

 INPUT TRANSFORM: S DFN=DA D INE^DGLOCK

 LAST EDITED: JUL 21, 2022

 HELP-PROMPT: The source of the TWX which informed you

 this patient is ineligible for treatment.

 DESCRIPTION: \*The need to collect data in this field is

 obsolete. DG\*5.3\*1081 removed the ability

 to edit this field. The field remains for

 historical data only.\*

 Choose from the available listing the

 source of the TWX which informed you that

 this applicant was ineligible for

 treatment. An ineligible date must be

 specified in order to enter/edit this

 field and the user must hold the

 designated security key. This field may

 not be deleted as long as an ineligible

 date is on file.

 DELETE TEST: 1,0)= S DFN=DA D INED^DGLOCK1 I '$D(X)

 WRITE AUTHORITY: ^

 GROUP: IPT

 UNEDITABLE

 NOTES: XXXX--CAN'T BE ALTERED EXCEPT BY

 PROGRAMMER

2,.1653 INELIGIBLE TWX CITY INE;3 FREE TEXT

 TWX CITY-INELIGIBLE

 INPUT TRANSFORM: K:$L(X)>30!($L(X)<3) X I $D(X) S DFN=DA D

 INE^DGLOCK

 LAST EDITED: JUL 21, 2022

 HELP-PROMPT: The city from which the TWX informing you

 of this patients ineligibility originated

 [3-30 characters].

 DESCRIPTION: \*The need to collect data in this field is

 obsolete. DG\*5.3\*1081 removed the ability

 to edit this field. The field remains for

 historical data only.\*

 Enter the city from which the TWX which

 informed you this applicant was ineligible

 for treatment originated [3-30

 characters]. An ineligible date must be

 specified in order to enter/edit this

 field and the user must hold the

 designated security key. This field may

 not be deleted as long as an ineligible

 date is on file.

 DELETE TEST: 1,0)= S DFN=DA D INED^DGLOCK1 I '$D(X)

 WRITE AUTHORITY: ^

 GROUP: IPT

 UNEDITABLE

 NOTES: XXXX--CAN'T BE ALTERED EXCEPT BY

 PROGRAMMER

2,.1654 INELIGIBLE TWX STATE INE;4 POINTER TO STATE FILE (#5)

 TWX STATE-INELIGIBLE

 INPUT TRANSFORM: S DFN=DA D INE^DGLOCK

 LAST EDITED: JUL 21, 2022

 HELP-PROMPT: The state from which the TWX informing you

 of this patients ineligibility originated.

 DESCRIPTION: \*The need to collect data in this field is

 obsolete. DG\*5.3\*1081 removed the ability

 to edit this field. The field remains for

 historical data only.\*

 Enter the state from which the TWX which

 informed you this applicant was ineligible

 for treatment originated. An ineligible

 date must be specified in order to

 enter/edit this field and the user must

 hold the designated security key. This

 field may not be deleted as long as an

 ineligible date is on file.

 DELETE TEST: 1,0)= S DFN=DA D INED^DGLOCK1 I '$D(X)

 WRITE AUTHORITY: ^

 GROUP: IPT

 UNEDITABLE

 NOTES: XXXX--CAN'T BE ALTERED EXCEPT BY

 PROGRAMMER

 FILES POINTED TO FIELDS

STATE (#5) INELIGIBLE TWX STATE (#.1654)

2,.1656 INELIGIBLE VARO DECISION INE;6 FREE TEXT

 VARO DECISION-INELIGIBLE

 INPUT TRANSFORM: K:$L(X)>75!($L(X)<3) X I $D(X) S DFN=DA D

 INE^DGLOCK

 LAST EDITED: JUL 21, 2022

 HELP-PROMPT: The decision made by the VARO concerning

 this patient's ineligibility [3-75

 characters].

 DESCRIPTION: \*The need to collect data in this field is

 obsolete. DG\*5.3\*1081 removed the ability

 to edit this field. The field remains for

 historical data only.\*

 Enter the VARO decision concerning this

 applicant's ineligibility [between 3-75

 characters]. An ineligible date must be

 specified in order to enter/edit this

 field and the user must hold the

 designated security key. This field may

 not be deleted as long as an ineligible

 date is on file.

 DELETE TEST: 1,0)= S DFN=DA D INED^DGLOCK1 I '$D(X)

 WRITE AUTHORITY: ^

 GROUP: IPT

 UNEDITABLE

 NOTES: XXXX--CAN'T BE ALTERED EXCEPT BY

 PROGRAMMER

 CROSS-REFERENCE: 2^AENR1656^MUMPS

 1)= D EVENT^IVMPLOG(DA)

 2)= D EVENT^IVMPLOG(DA)

 3)= DO NOT DELETE

 This cross-reference is used to notify HEC

 of changes that may affect enrollment.

 FILES POINTED TO FIELDS

STATE (#5) INELIGIBLE TWX STATE (#.1654)

1. Six existing VHAPs in the HEALTH BENEFIT PLAN (#25.11) file LONG DESCRIPTION fields are updated:

NAME : VETERAN RESTRICTED MED BENEFITS PLAN CODE: 222

 COVERAGE CODE: RM01001

 SHORT DESCRIPTION:

 RM

 LONG DESCRIPTION:

 Veterans who are not enrolled but can be seen for their Service

 Connected (SC) conditions only (and/or MST if MST is indicated).

 Veterans who are eligible to be screened for Military Sexual

 Trauma and Presumptive Psychosis or other active mental illness.

 Veterans are exempt from copayments for the screening encounter.

 Veterans assigned this VHAP meet one of the following conditions:

 . Cancel/Decline - Receive medical benefits for SC conditions only

 . Rejected - Receive medical benefits for SC conditions only

 . Ineligible and SC 0% - Receive medical benefits for SC conditions

 only

 . Ineligible and MST - Receive medical benefits for MST conditions

 only

 For Eligible Individuals, under Veterans Comprehensive Prevention,

 Access to Care, and Treatment Act of 2020 (COMPACT), Section 201,

 VA will furnish, reimburse, pay for emergent suicide care, make

 referrals, as appropriate, for care following the period of

 emergent suicide care. Eligible Individuals are ones who served

 in the active military service, regardless of length of service,

 and who were discharged, excluding anyone who received a

 dishonorable discharge or was discharged or dismissed by reason.

NAME : NON VETERAN OTHER RESTRICTED MED BENEFITS

 PLAN CODE: 223 COVERAGE CODE: OR01001

 SHORT DESCRIPTION:

 ORM

 LONG DESCRIPTION:

 Veterans who are eligible to be screened for Military Sexual Trauma

 and Presumptive Psychosis or other active mental illness. Veterans

 are exempt from copayments for the screening encounter.

 Non-Veterans authorized to receive medical benefits limited to a

 very specific situation

 Includes any of the following:

 . MST - Non-Veteran (Active Duty)

 . Presumptive (38 USC 1702- 38 CFR 17.109)

 . Former Servicemembers with Other Than Honorable (OTH)

 discharges who present for certain services.

 For Eligible Individuals, under Veterans Comprehensive Prevention,

 Access to Care, and Treatment Act of 2020 (COMPACT), Section 201,

 VA will furnish, reimburse, pay for emergent suicide care, make

 referrals, as appropriate, for care following the period of emergent

 suicide care. Eligible Individuals are ones who served in the active

 military service, regardless of length of service, and who were

 discharged, excluding anyone who received a dishonorable discharge

 or was discharged or dismissed by reason.

NAME : RESTRICTED EXAMINATION ONLY PLAN CODE: 224

 COVERAGE CODE: EX01001

 SHORT DESCRIPTION:

 REO

 LONG DESCRIPTION:

 Veterans being registered for a Registry exam (i.e., Burn Pit, Agent

 Orange, etc.) or Compensation and Pension (C&P) exam as requested by

 the Veterans Benefits Administration (VBA). The Veterans are not

 subject to Copayment Requirements for exam.

 Includes the following Non-Veterans and Veterans assigned this VHAP

 meet one of the following conditions:

 o Enrollment Status is Rejected, Below Enrollment Group

 Threshold (EGT)

 o Enrollment Status is Closed Application, for reason Pending Means

 Test Required

 o Enrollment Status is Not Eligible; Ineligible Date

 o Enrollment Status is Not Eligible; Refuse to pay copay

 o Veterans being registered and enrollment status is Registration

 Only

 o Veterans enrolled

 o Veterans Enrollment Status is Rejected

 For Eligible Individuals, under Veterans Comprehensive Prevention,

 Access to Care, and Treatment Act of 2020 (COMPACT), Section 201,

 VA will furnish, reimburse, pay for emergent suicide care, make

 referrals, as appropriate, for care following the period of emergent

 suicide care. Eligible Individuals are ones who served in the active

 military service, regardless of length of service, and who were

 discharged, excluding anyone who received a dishonorable discharge or

 was discharged or dismissed by reason or while serving in the Armed

 Forces, was the victim of a physical assault of a sexual nature, a

 battery of a sexual nature, or sexual harassment.

NAME : HUMANITARIAN PLAN CODE: 225

 COVERAGE CODE: HM01001

 SHORT DESCRIPTION:

 HM

 LONG DESCRIPTION:

 Civilians presenting to VA for care with no VA eligibility

 qualifications.

 Note: Non-enrolled Veterans can be under Humanitarian. They would be a

 Veteran:

 o Verified in VES but choose NOT to enroll and be in a "Registration

 Only" status.

 o Pending; Eligibility Unverified - Veterans who do not have a prior

 period of enrollment and are still within the 365-day period who

 have not provided evidence of Veteran status.

 o Pending; Other - VES cannot determine enrollment status.

 o Pending; No Eligibility Code - VES cannot determine enrollment status.

 o Pending - VES cannot determine enrollment status.

 o Unverified - VES cannot determine enrollment status.

 o Enrollment Status is Closed Application, for reason Pending Proof of

 Qualifying Service

NAME : APPLICANT IN PROCESS PLAN CODE: 226

 COVERAGE CODE: AN01001

 SHORT DESCRIPTION:

 INC

 LONG DESCRIPTION:

 Veterans who applied for VA healthcare benefits, but eligibility has not

 been verified or a final enrollment determination could not be made.

 . Pending; Means Test Required - Veterans whose Veterans Status has

 been verified and who have not provided initial Means Test to

 determine enrollment.

 . Pending; Purple Heart Unconfirmed - A temporary eligibility for 14

 days.

 For Eligible Individuals, under Veterans Comprehensive Prevention,

 Access to Care, and Treatment Act of 2020 (COMPACT), Section 201, VA

 will furnish, reimburse, pay for emergent suicide care, make referrals,

 as appropriate, for care following the period of emergent suicide care.

 Eligible Individuals are ones who served in the active military service,

 regardless of length of service, and who were discharged, excluding

 anyone who received a dishonorable discharge or was discharged or

 dismissed by reason or while serving in the Armed Forces, was the victim

 of a physical assault of a sexual nature, a battery of a sexual nature,

 or sexual harassment.

NAME : INELIGIBLE PLAN CODE: 290

 COVERAGE CODE: IN01001

 SHORT DESCRIPTION:

 Inel

 LONG DESCRIPTION:

 Non-Veterans and Non-Service connected Veterans who applied for VA

 healthcare services, but are not enrolled due to an enrollment

 decision, or after a one year period the application is

 administratively closed due to non receipt of information needed to

 verify Veteran status and/or financial information used to

 determine enrollment status. Veterans who are eligible to be screened

 for Military Sexual Trauma and Presumptive Psychosis or other active

 mental illness. Veterans are exempt from copayments for the screening

 encounter. Also, Veterans who are eligible based on income but refuse

 to agree to pay copayment.

 Non-Veterans and Veterans assigned this VHAP meet one of the

 following conditions:

 . Enrollment Status is Rejected, Below Enrollment Group

 . Threshold (EGT)

 . Enrollment Status is Closed Application, for reason Pending Means

 Test Required

 . Enrollment Status is Not Eligible; Ineligible Date

 . Enrollment Status is Not Eligible; Refuse to pay copay

 For Eligible Individuals, under Veterans Comprehensive Prevention,

 Access to Care, and Treatment Act of 2020 (COMPACT), Section 201,

 VA will furnish, reimburse, pay for emergent suicide care, make

 referrals, as appropriate, for care following the period of emergent

 suicide care. Eligible Individuals are ones who served in the active

 military service, regardless of length of service, and who were

 discharged, excluding anyone who received a dishonorable discharge

 or was discharged or dismissed by reason or while serving in the

 Armed Forces, was the victim of a physical assault of a sexual

 nature, a battery of a sexual nature, or sexual harassment.

**SECTION 2: REGISTRATION SCREEN UPDATES**

1. The INELIGIBLE/MISSING DATA, SCREEN <10> screen DATA GROUP <1> is UNEDITABLE and displays the Ineligible Date: and Reason: field values. The TWX Source, TWX City, TWX State and VARO Decision prompts are removed:

 INELIGIBLE/MISSING DATA, SCREEN <10>

DGPATIENT,TEST MMM DD, YYYY

666-##-#### NSC VETERAN

==========================================================================

<1> Ineligible Date: FEB 21,2022

 Reason: UNANSWERED

[2] Missing Date: NOT APPLICABLE TWX Source: NOT APPLICABLE

 TWX City: NOT APPLICABLE TWX State: NOT APPLICABLE

 Reason: NOT APPLICABLE

<RET> to CONTINUE, 2 or ALL to EDIT, ^N for screen N or '^' to QUIT:

Figure : INELIGIBLE/MISSING DATA, SCREEN <10>

1. The Inconsistency 15 - INEL REASON UNSPECIFIED is no longer checked when inconsistencies are reported and does not prevent transmission of an ORU/ORF Z07 Health Level 7 (HL7) message to VES:

DGpatient,One FEB 29,1992

666-98-7989 NSC VETERAN

==========================================================================

13 - POS UNSPECIFIED+ 14 - ELIG CODE UNSPECIFIED

62 - EMERGENCY CONTACT NAME MISSING 99 - CAN'T PROCESS FURTHER

Inconsistencies followed by [+] will prevent a Z07

DO YOU WANT TO UPDATE THESE INCONSISTENCIES NOW? Yes//

Figure : Inconsistency Check

1. The Primary Eligibility Code prompt on the ELIGIBILITY STATUS DATA, SCREEN <7> screen is modified. If the patient's INELIGIBLE DATE field (#.152) of the PATIENT file (#2) is populated, then the EXPANDED MH CARE NON-ENROLLEE eligibility code is not valid as the Primary Eligibility Code for the patient and is not available for selection.

## Known Issues

No known or open issues were identified in this release.

## Product Documentation

The following documents apply to this release:

Documentation Title File Name

DG\*5.3\*1081 Release Notes DG\_5\_3\_1081\_RN.PDF
User Manual Version 5.3 - Registration Menu PIMS\_REG\_UM.PDF
PIMS Version 5.3 Technical Manual PIMS\_TM.PDF
PIMS V. 5.3 ADT Module User Manual -
 Supervisor ADT Menu SADT\_UM.PDF

Changes to the Income Verification Match (IVM) Technical Manual are described in Informational Patch IVM\*2.0\*207.

Documentation can be found on the VA Software Documentation Library (VDL) at: <http://www.va.gov/vdl/>.