Eligibility and Enrollment (E&E)

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

DG*5.3*1081

Release Notes



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Department of Veterans Affairs (VA)

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1 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.

2 Purpose

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

3 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.

4 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.

4.1 New Features and Functions Added

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

4.2 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

VA CODE NUMBER: 14

ABBREVIATION: CE

TYPE: NON-VETERAN

PRINT NAME: CLINICAL EVALUATION SELECT AS ADDITIONAL: YES

2. 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

3. 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.

4. 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:	XXXXCAN'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: $K: L(X) > 40! (L(X) < 1) X I L(X) D EK^DGLOCK$

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.

5. 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 ELEMENT	NAME TITLE	GLOBAL LOCATION	DATA 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^DG	GLOCK
	LAST EDITED:	JUL 21, 2022	
	HELP-PROMPT:	The source of the	e TWX which informed you
			neligible for treatment.
	DESCRIPTION:	*The need to coll	ect data in this field is
		obsolete. DG*5.3	3*1081 removed the ability
			d. The field remains for
		historical data o	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 L(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

FIELDS

This cross-reference is used to notify HEC of changes that may affect enrollment.

FILES POINTED TO

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

6. 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: 0R01001

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:

Figure 1: INELIGIBLE/MISSING DATA, SCREEN <10>

2. 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:

Figure 2: Inconsistency Check

3. 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.

4.3 Known Issues

No known or open issues were identified in this release.

4.4 Product Documentation

The following documents apply to this release:

Documentation TitleFile NameDG*5.3*1081 Release NotesDG_5_3_1081_RN.PDFUser Manual Version 5.3 - Registration MenuPIMS_REG_UM.PDFPIMS Version 5.3 Technical ManualPIMS_TM.PDFPIMS V. 5.3 ADT Module User Manual -PIMS_TM.PDF

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/.