Office of Information and Technology

HealthShare Referral Manager Community Provider User Guide

Community Care Referral and Authorization (CCRA) Managed Services

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U.S. DEPARTMENT OF VETERANS AFFAIRS (VA)

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Introduction

Project and Solution Overview

Community Care Referral and Authorization (CCRA) is an enterprise-wide system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community. Clinical and VA community care staff located at Veteran Affairs medical centers (VAMCs), outpatient clinics, community-based outpatient clinics (CBOCs), and Veterans Integrated Service Network (VISN) offices use this solution to enhance Veteran access to care. The HealthShare Referral Manager (HSRM) application is an integral component of both the CCRA system and community care information technology (IT) architecture that allows Veterans to receive care from community providers.

HSRM allowed VA to transition from a largely manual process to a more streamlined process that generates standardized referrals and authorizations according to clinical and business rules. HSRM supports clinical and administrative processes that:

» Seamlessly provide eligible Veterans with prompt referrals to a community provider of their choice
» Provide community providers with referrals and authorizations consistent with industry standards
» Decrease the administrative burden on VA clinical and community care staff members by establishing clinical and business pathways that reflect best practices, consistent outcomes, and reduced turnaround times, along with a solution that automates those pathways
» Facilitate communication between community care staff, third-party administrators (TPAs), and community providers via a unified platform that enables the secure exchange of medical information

HSRM allows VA and community providers to better manage community care referrals and authorizations, resulting in simpler processing for VA and community providers and enhanced patient experience for Veterans.

User Guide Overview

Community providers play a key role in delivering high quality care to Veterans in their communities. HSRM enables community providers to receive and process referrals from VA and share information faster and more accurately than ever before. Community providers, VA, and Veterans all benefit from this new system. This user guide provides details about the community provider's role in processing referrals in HSRM and how to maximize system functionality.

> » *Note: HSRM will be down for routine maintenance on the second Tuesday of every month from 10:00 p.m. to 4:00 a.m. Eastern Time. During this time, users will be unable to access the system.*

HSRM Lifecycle

A referral's lifecycle begins when the referral is received in HSRM, and it ends when the episode of care (EOC) is complete, and all medical documentation has been received. There are six steps in the lifecycle. Community providers complete steps 3, 4, and 5, as shown in the referral lifecycle diagram.

Exhibit 1: HSRM Referral Lifecycle
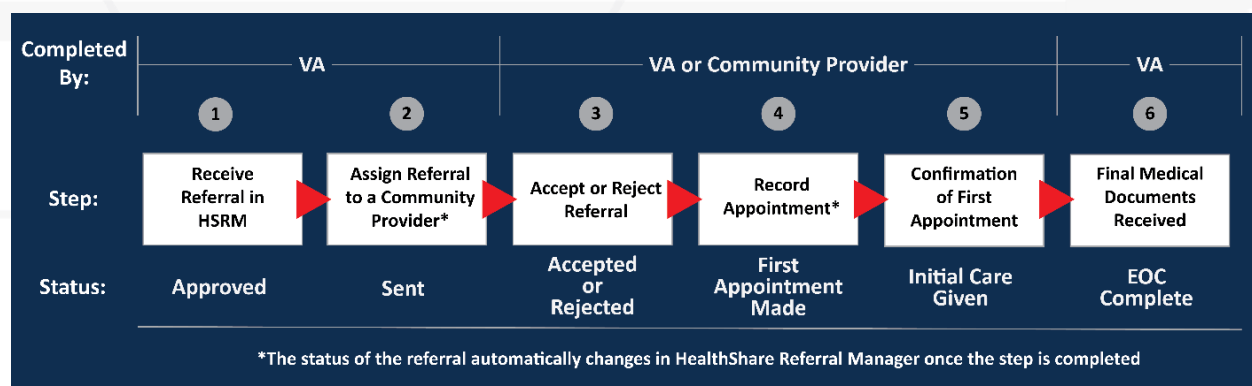
The referral lifecycle model in **Exhibit 1** shows the steps occurring in the following order, with VA performing steps 1, 2, and 6, and VA or the community provider performing steps 3 through 5:

» Step 1 is receiving the referral.
» Step 2 is assigning the referral to a community provider.

» Step 3 is accepting or rejecting the referral.
» Step 4 is recording the appointment.
» Step 5 is confirming the first appointment.
» Step 6 is receiving the final medical documents. This is performed by VA and completes the EOC.

» *Note: A referral in any status will automatically update to EOC Complete 180 days after the referral expiration date.*

Accessing HSRM

Staff who typically process referrals, accept, and reject referrals, record appointments, and share medical documentation with VA need HSRM accounts.

To be eligible for HSRM, your facility must have an active Community Care Network (CCN) agreement with TriWest or Optum or have a Veterans Care Agreement (VCA) with VA.

Follow the steps below to sign up for HSRM.

» *Note: Links to all documents are on the Office of Community Care web page.*

1. Register for and attend a live training webinar on Veterans Health Administration (VHA) Training Finder Real-time Affiliate Integrated Network (TRAIN), complete the online community provider self-paced eLearning series on VHA TRAIN , or refer to this guide to learn how to use HSRM.
2. Refer to the HSRM Account Creation Guide to sign up for an ID.me account at the ID.me website.
3. The facility point of contact from your organization fills out the End User Tracker (EUT) with information for staff requiring HSRM access, then submits the EUT to hsrmsupport@va.gov.

» *Note: Please ensure the email addresses entered in the EUT match those used for each respective user's ID.me account.*

4. The HSRM Help Desk provides the facility point of contact with confirmation that staff access has been granted.
5. All end users access HSRM via the CCRA website at https://ccracommunity.va.gov.

> » *Note: Users must log in to HSRM at least once every 35 days to maintain their access. If your HSRM account is deactivated, email hsrmsupport@va.gov to request reactivation.*
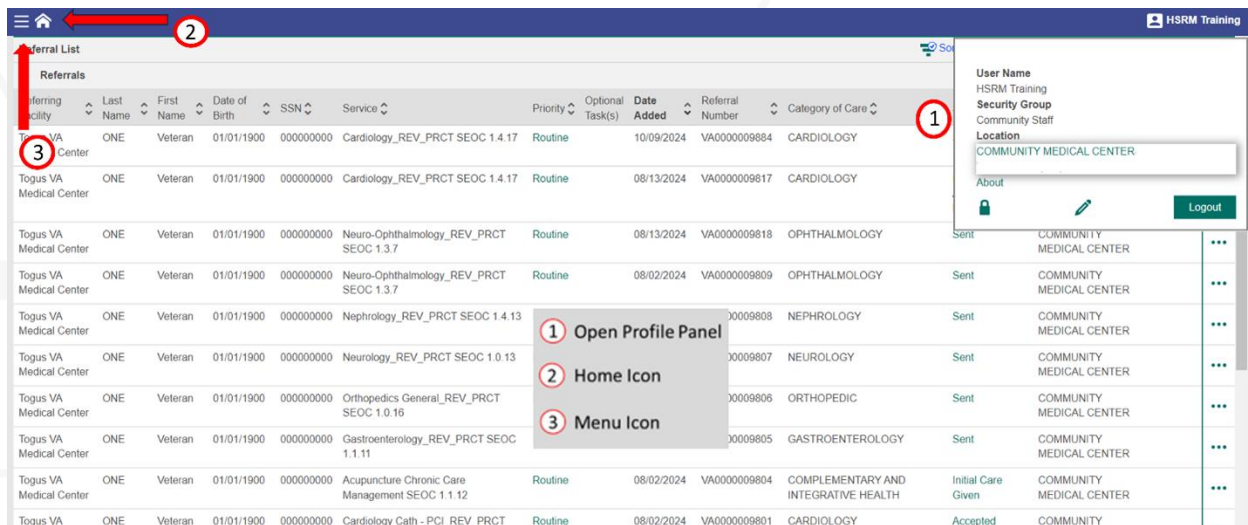
6. Once these steps are complete, contact the VA medical center(s) you work with to let them know you have access to HSRM and to discuss your transition to use HSRM.

HSRM Essentials

HSRM Frame

The HSRM frame, shown in **Exhibit 2**, contains options available to users on any screen in HSRM.

Exhibit 2: HSRM Frame – Open Profile Panel, Menu, and Home Icons

1. The **Open Profile Panel** icon 🙎 allows users to view user profile information such as username, security group, and location. The **Logout** icon [Logout] is within the **Open Profile Panel**.
2. The **Home** icon 🏠 allows users to quickly navigate back to the Home screen from any screen in HSRM. Select the **Home** icon to return to the Home screen. The Home screen for all users is the **Referral List**.
3. The **Menu** icon ☰ allows users to find referrals by patient, find referrals, view a referral, view the Task List, and run reports. Selecting the **Menu** icon reveals a drop-down list with the available options. Menu options are based on user security rights.

Working in HSRM

Locate a Referral

HSRM allows community providers to locate referrals more quickly and manage them according to their priority. When logging in to the system, the Referral List screen—which is also the home screen—appears. The Referral List screen features a user to-do list; it shows all of the referrals from VA in a central location and allows users to locate referrals.

Users can locate referrals by sorting the **Referral List** or by using the **Find Referrals** or **Find Referral by Patient** features.
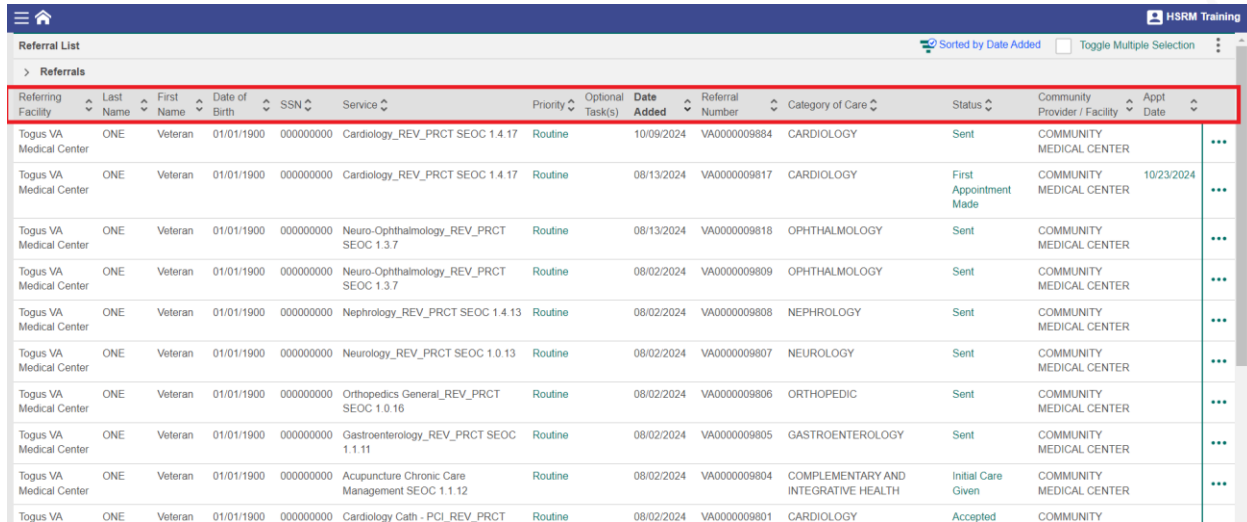
Basic Sort

The Basic Sort feature allows users to rearrange all lists in HSRM by column heading. Sorting the Referral List allows users to view the information in any column in ascending or descending order. The default view lists referrals by Date Added in descending order, making it easy to see the referrals most recently sent from VA.

To locate a referral by using the Basic Sort feature:

1. Navigate to the Referral List by selecting either the Home icon 🏠 (also called link home for screen readers) or the Menu icon ≡ (also called link menu for screen readers) at the top left of the screen, then selecting Referral List on the menu.
2. Select a column heading to sort data in ascending order by that category. Select it a second time to sort in descending order. Select it a third time to sort by the default, which is Date Added, descending.
3. Select the row of the relevant referral to access the Referral Details screen.

Exhibit 3: Referral List

Advanced Sort

The Advanced Sort feature provides multiple criteria by which users can sort any Referral List in HSRM.

To locate a referral by using the Advanced Sort feature:

1. Navigate to the **Referral List** by selecting either the **Home** icon (also called link home for screen readers) or the **Menu** icon (also called link menu for screen readers), then select the **Referral List** on the menu by using the up and down arrows or selecting it.
2. Select the hyperlink on the **Referral List** to display the **Advanced Sort** (screen readers call this "Referral List sorted **Date Added** descending, press enter to open sorting options").

Exhibit 4: Referral List – Advanced Sort

3. The available options appear. Users can select both primary and secondary sort criteria. Select **Ascending** ⌃ (referred to as the Ascending icon for screen readers) or **Descending** ⌄ (referred to as the Descending icon for screen readers) associated with the specific criterion for the sort. In the case shown below, Last Name and Date of Birth have been selected in ascending order. After selecting **Apply**, the referrals will be sorted according to the chosen criteria.

4. Select the row of the relevant referral to view the **Referral Details** screen.

Exhibit 5: Advanced Sorting Options

Find Referrals

In addition to sorting the Referral List, community providers can search for referrals in HSRM using the Find Referrals feature. Users can search by referral number, Unique Consult ID, network, treating specialty, provider name, service requested, category of care, date added from, date added to, priority, source of referral, status, and optional task(s).

> » *Note: The Status field is mandatory and has multiple statuses selected by default. Users can choose from Accepted, First Appointment Made, Initial Care Given, Rejected, and Sent by removing those that are not desired.*

To find referrals:
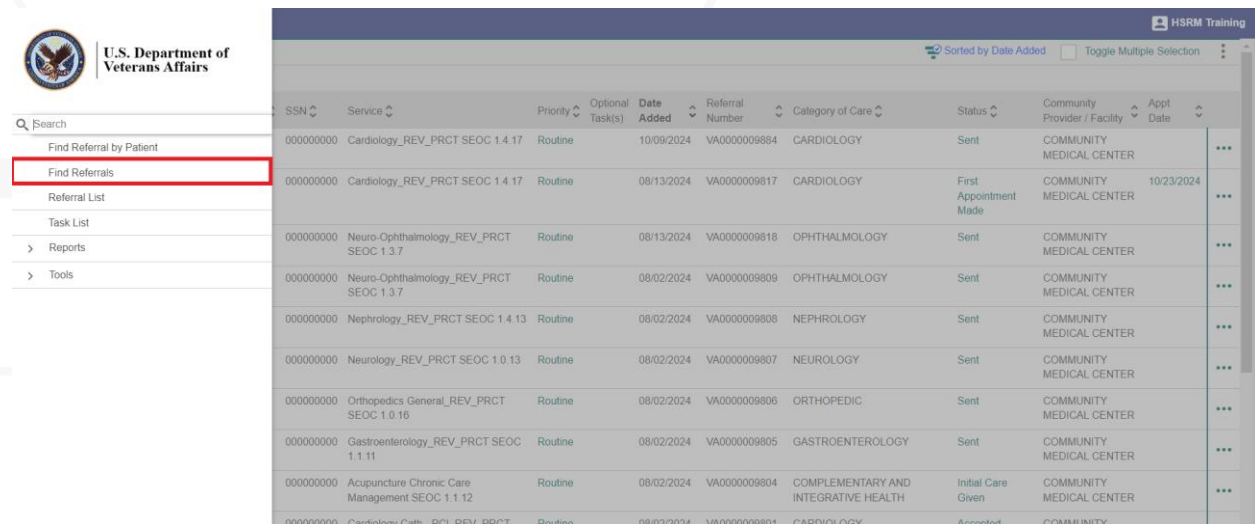
1. Select the **Menu** icon ≡ (also called link menu for screen readers) from any screen to view the Main Menu.
2. Select **Find Referrals** to navigate to the **Referral Search** screen.

Exhibit 6: Find Referrals

3. Enter information in any field within the **Referral Search** screen.

Exhibit 7: Referral Search Screen

4. Select the **Find** button. The resulting **Referral List** screen lists referrals that match the search criteria.

» *Notes:*
- *When the values are entered for more than one field, HSRM looks for records that match all fields. There is no "or" search available.*
- *The search is not case sensitive (e.g., there is no difference between Smith, smith, and SMITH).*
- *The search looks for numbers matching, or starting with, the values entered (e.g., entering 325 will return 325 – 000 but not 000 – 325).*

Find Referral by Patient

Community providers can search for a referral using the Find Referral by Patient feature. Users will have the patient's last name, first name, and date of birth as required fields but can also refine their search using the patient's middle name, birth sex, Social Security Number (SSN), Integration Control Number (ICN), or Electronic Data Interchange Personal Identifier (EDIPI).

To access the Find Referral by Patient feature:

1. Access the menu by selecting the Menu ≡ icon.
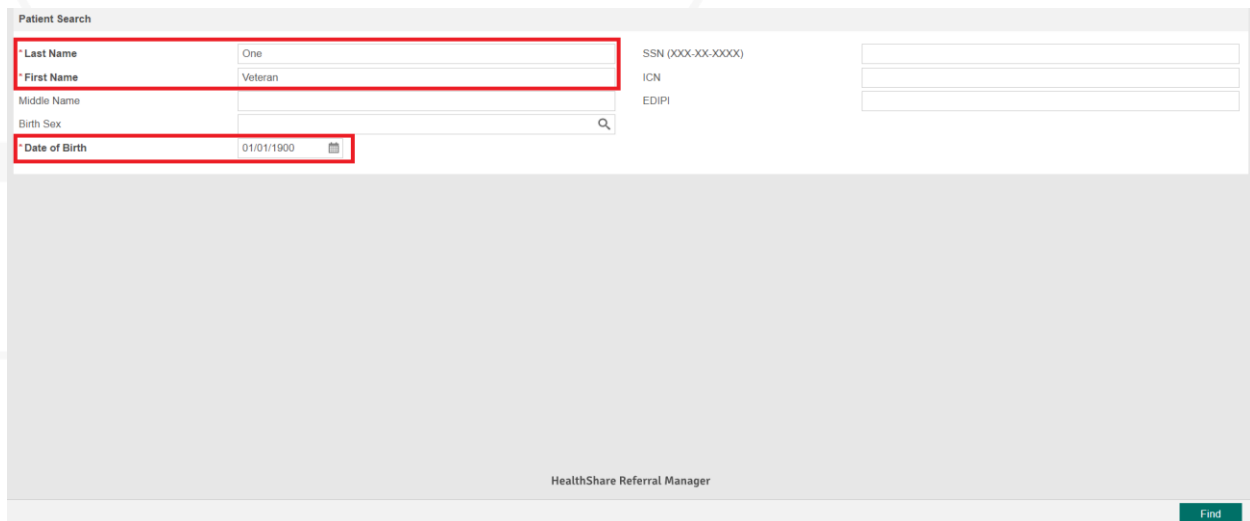2. Select Find Referral by Patient.

Exhibit 8: Find Referral by Patient

3. Populate the required fields (i.e., Last Name, First Name, and Date of Birth) and any other optional fields (if known). Select the Find button to generate the search.
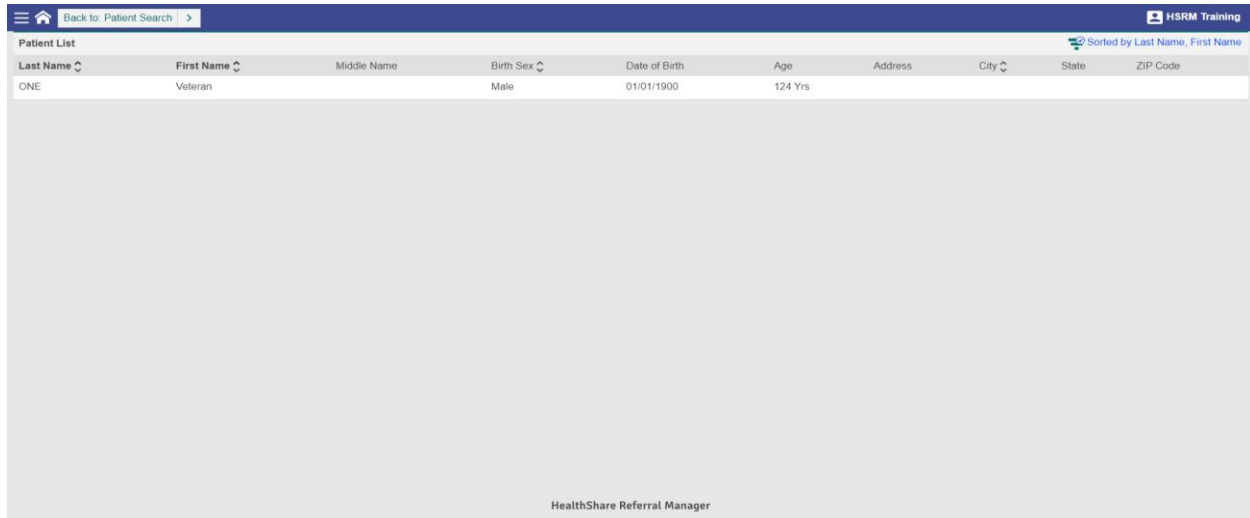
Exhibit 9: Patient Search Screen

4. The resulting **Patient List** will show patients that match the search criteria. Select the row of the patient to view a Referral List for that specific patient.

Exhibit 10: Patient List

Manually Change the Status of a Referral

The referral status shows where a referral is in its lifecycle. As shown in **Exhibit 1**, the possible statuses are Approved, Sent, Accepted, Rejected, First Appointment Made, Initial Care Given, and EOC Complete. Community providers have access to all statuses except Approved and EOC Complete.

To manually update the status of a referral:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Navigate to the **Referral Details** screen by selecting the referral row.

Exhibit 11: Referral Details Screen

3. Navigate to the Referral Processing Information section on the **Referral Details** screen.

4. Select the **Status** field and select the new status. Community providers can change the referral status to **Accepted, Rejected, First Appointment Made** (the status automatically changes to **First Appointment Made** when an initial appointment is recorded), or **Initial Care Given**, depending on where the referral is in its lifecycle.

» *Note: If a user selects the Rejected status, the Referral Return Reason field will be mandatory. Additionally, the Referral Return Reason field is only editable when the user updates the status to Rejected.*

Exhibit 12: Referral Details – Status Field

5. Enter any relevant comments regarding the referral in the **Comments** field of the **Referral Processing Information** section.
6. Select the **Update** button [Update] to save changes and return to the previous screen. Select the **Apply** button [Apply] to save changes and stay on the same screen.

» *Note: The C6 Referral checkbox under the Referral Processing Information section pertains to referrals assigned to the Community Care Clinical Coordination Contact Center (C6). These user groups include C6 Supervisor, C6 Administrator, and C6 Clinical Staff. If the box is checked, the users in the C6 groups will be able to view and manage these referrals.*

Access Standardized Episode of Care Information

A Standardized Episode of Care (SEOC) is a bundle of services authorized under a single referral. A SEOC includes all clinically related services for one patient for a discrete diagnostic condition within a specific period across a continuum of care. A SEOC helps reduce the need to seek individual authorization for each element of care. It includes all physician, inpatient, and outpatient care, as well as labs and diagnostics. Within HSRM, the user can view a list of services associated with the SEOC. This is the procedural overview of services.

To view SEOC details:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Select the row of the referral to navigate to the **Referral Details** screen.

3. Navigate to the **Service/s Requested** section on the **Referral Details** screen and select the **SEOC Details** link.

» *Note: VA is required by law to obtain precertification and bill third-party payers (TPPs) for care that is not related to a Veteran's service or to obtain special authority for Veterans who have other health insurance (OHI). Users can find precertification information and instructions under the SEOC Details link and in the Offline Referral Form.*

Exhibit 13: Referral Details – SEOC Details

4. Review the **Procedural Overview** for the SEOC.

Exhibit 14: SEOC Details Screen

Print the Offline Referral Form

Printing the Offline Referral Form enables community providers to retain a hard copy of the referral for their files. The Offline Referral Form contains referral details, additional referral information, billing and precertification information, patient details, and SEOC information. Community providers can print offline referral forms for individual or multiple referrals.

Individual Referral

To print the Offline Referral Form for an individual referral:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Select the row of the referral to navigate to the **Referral Details** screen.
3. Select the **Component Menu** icon ⋮ (also called the Referral List component menu button by screen readers) from the Referral Details section, then select Offline Referral Form from the Print drop-down menu.

Exhibit 15: Component Menu – Offline Referral Form

4. The **Offline Referral Form** appears, which users can print, download, and save.

Exhibit 16: Offline Referral Form

Multiple Referrals

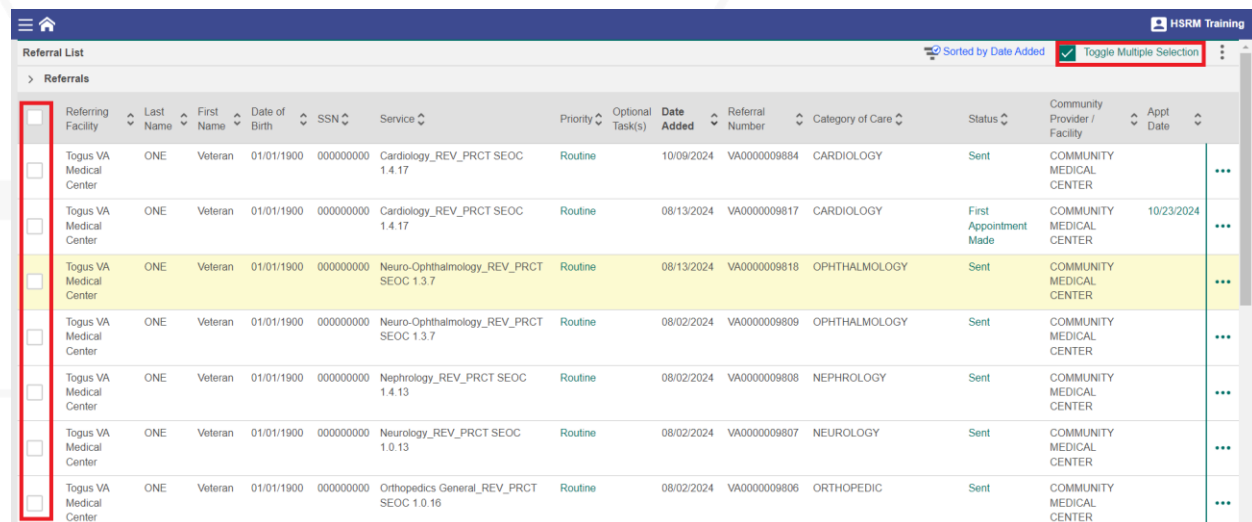To generate an Offline Referral Form for multiple referrals:

1. Navigate to the **Referral List** by selecting either the **Home** icon 🏠 (also called link home for screen readers) or the **Menu** icon ☰ (also called link menu for screen readers), then selecting **Referral List** on the menu by using the up and down arrows or selecting it.

   » *Note: Users may generate an Offline Referral Form for multiple referrals from any referral list, including the Veteran's referral list.*

2. Select the **Toggle Multiple Selections** checkbox ☑ to enable the selection of multiple referrals (for screen readers, select the toggled multiple selection checkbox not checked; to select, press enter), then select the checkboxes next to the appropriate referrals (for screen readers, select the row button for each preferred referral).

Exhibit 17: Referral List – Multiple Referrals

3. Select the **Component Menu** icon ⋮ (also called Referral List component menu button by screen readers) and select **Selected Offline Referral Forms** from the **Email** drop-down menu.

Exhibit 18: Component Menu – Selected Offline Referral Forms

4. The Offline Referral Form appears.

Exhibit 19: Multiple Offline Referrals Form Cover Page

» *Note: Users can download and save the Offline Referral Form. Compiled Offline Referral Forms will contain a cover page.*

Manage Documents

HSRM allows VA and community providers to easily upload and download medical documents such as medical records and images. Prior to providing care to a Veteran,

community providers can download and review documents that VA shares regarding the Veteran/patient. Following care, community providers upload relevant patient care documentation for VA's review. This eliminates faxing and emailing documentation and enhances the accuracy of patient documentation. HSRM accepts most file types, including JPG, BMP, PNG, Microsoft Office, and PDF. JPG and PDF files are displayed in the preview section. There are no limitations on file size.

View and Download Documents

To view and download documents:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Navigate to the **Referral Details** screen by selecting the referral row.
3. Select **Add/View Documents** on the **Referral Details** screen to open the **Documents** screen. Here, users can view all documents that have been added to the referral.

   » *Note: Users may also view and download documents by accessing Documents from the Additional Referral Information screen. These instructions are in the View Additional Referral Information section of this guide.*

Add Documents

To add documents to a referral:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Navigate to the **Referral Details** screen by selecting the referral row.
3. Select **Add/View Documents** on the **Referral Details** screen to open the Documents screen.

Exhibit 20: Referral Details – Add Documents to a Referral

4. Select the **New** button [New] on the **Documents** screen. The **Add Document** screen appears.
5. Enter data in the corresponding fields on the **Add Document** screen.

   » *Note: The Date Created, Time Created, and User Created fields populate automatically and are read-only.*

Exhibit 21: Add Document Screen

6. Select the **Upload** button [Upload] and select the file from the computer's hard drive.
7. To identify the type of document, select the **Magnifying Glass** icon 🔍 (also called document type lookup graphic by screen readers) in the **Document Type** field and

choose the appropriate type (e.g., **Medical Documents** or **Request for Services/Secondary Authorization Request [SAR]**). This will trigger an automatic task for VA to review the document.

8. Select the **Update** button ![Update] at the bottom right of the screen to save and go back to the **Documents** screen.
9. Select **Referral Details** from the **Breadcrumb Trail** drop-down list to go back to the **Referral Details** screen or continue to add documents in the same manner.

Record an Appointment

Recording appointments in HSRM makes this information available to VA without having to phone, email, or fax, thus reducing the administrative burden for both VA and community providers. Users can record an appointment in the system from the Referral Details screen. Users must record a first appointment for every referral they accept. Recording any subsequent appointments in HSRM is optional.

» *Note: Do not forget to book the appointment in your own external system.*

To record an appointment:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Select the referral to navigate to the **Referral Details** screen.Select the **Component Menu** icon ⋮ (also called Referral List component menu button by screen readers) located in the Referral Details section to open the Component Menu.Select Options and Record Appointment.

Exhibit 22: Referral Details – Record Appointment

3. Enter the appropriate information (e.g., **Service Requested**, **Appointment for**, **Date**, and **Time**). Additionally, if the referral is with a provider in CCNs 1 – 5, HSRM requires users to indicate whether the Veteran self-scheduled the appointment or requested the specific appointment time. The mandatory question asks, "Did the Veteran self-schedule their appointment or independently request this specific appointment date?"

    » *Notes:*

        • *HSRM marks mandatory fields with an asterisk (screen readers identify these fields as Star and Required).*

The appointment date cannot be earlier than the referral date.

Exhibit 23: Record Appointment Screen

4. Select the **Update** Update button on the **Record Appointment** screen to save the appointment information. The **Referral Details** screen appears, and the status of the referral will automatically change to **First Appointment Made**.

    » *Notes:*

    - *Scheduling Method, Appointment Type, Appointment Duration, Appointment Reason, and Notes fields are optional. However, entering information in these fields is a best practice, as it ensures that VA and the community provider have access to all relevant appointment information in a central location.*

    - *The first appointment made in the SEOC will be on the Referral List for the duration of the referral, regardless of subsequent appointments that are scheduled and occur. The date of the first appointment made also displays in the Appointment Date field in the Initial Community Provider/Facility Information section on the Referral Details screen.*

    - *For a subsequent appointment, if the name of the specific facility caregiver is unknown or the appointment is with a facility caregiver other than the initial community provider, users may search for a community provider using the **Provider Profile Management System (PPMS) Provider Search**. This search component is described in the following section.*

Locate a Provider Using the PPMS Provider Search

Users can find a list of providers and their details using the PPMS Provider Search feature. The PPMS Provider Search allows users to search by a provider's National Provider Identifier (NPI), state, zip code, and affiliation.

> » *Note: The secondary provider must be in the same network as the current provider and the service must be included in the SEOC.*

1. On the Record Appointment screen, select the PPMS Provider Search link.

Exhibit 24: Record Appointment Screen – PPMS Provider Search

2. Enter the provider's NPI in the **NPI** field. The **State**, **Zip Code**, and **Affiliation** fields may also be used to narrow the search results. When a zip code is entered into the **Zip Code** field, the **State** field will automatically populate.
3. Select the **Find** button to connect directly to **PPMS** to find the provider with the designated NPI.

Exhibit 25: PPMS Provider Search Screen – NPI Search

4. **Select** the appropriate provider.

Exhibit 26: PPMS Provider Search Screen – NPI Search Results

Exhibit 27: Record Appointment Screen

> » *Note: If there is an appointment recorded for a provider other than the initial community provider, that second provider will not see the referral on their Referral List but will instead receive a task on their facility's task list that will allow them to work with the referral.*

Update the Status of an Appointment

To cancel an appointment:

1. Locate the referral (refer to the [Locate a Referral](#) section of this guide).
2. Select the Action Menu icon ••• (also called link Referral List action menu by screen readers) located in the Patient Banner on the Referral Details screen and select Additional Referral Information.

   > » *Note: The Action Menu icon ••• is also available from the end of the referral row on the Referral List.*

Exhibit 28: Action Menu – Additional Referral Information

3. Locate the appointment from the **Appointments** section and select the **Status** link. The **Appointment Change Status** screen appears.

Exhibit 29: Additional Referral Information Screen

   » *Note: Users can also access the Change Status screen by selecting the Appointment For link located on the referral row and then selecting Change Status, located beneath the Appointment Status field.*

4. The **Change Status To** field automatically populates as **Cancelled**. If selecting a different status, select the **Magnifying Glass** icon 🔍 (also called change status to

lookup graphic by screen readers) in the **Change Status To** field and select a status from the drop-down list.

» *Note: If a user selects No Show, they must also populate the Reason for No Show field.*

5. Select the **Magnifying Glass** icon 🔍 (also called reason for cancellation lookup graphic by screen readers) in the **Reason for Cancellation** field and select the appropriate reason for cancellation.
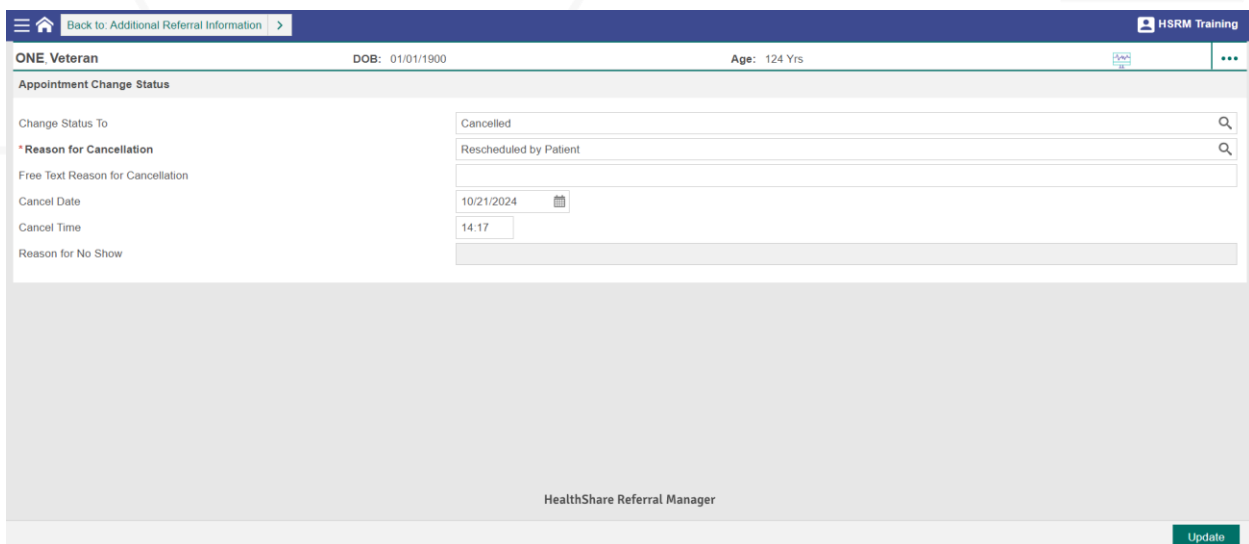
» *Note: Users must choose from one of the available reasons when cancelling:*

- *Cancelled by Community Provider*
- *Cancelled by Patient*
- *Cancelled by VA Staff*
- *Rescheduled by Community Provider*
- *Rescheduled by Patient*
- *Rescheduled by VA Staff*

6. Enter any additional information regarding the appointment cancellation.

» *Note: Users can also use the Free Text for Cancellation field for additional details regarding the appointment (e.g., spoke to Veteran's family member to cancel the appointment).*

Exhibit 30: Appointment Change Status Screen

7. Select the **Update** button to save changes.

8. The appointment status now displays as **Cancelled**. Once a user changes the appointment status to **Cancelled** or **Completed**, the appointment is no longer editable.

Exhibit 31: Additional Referral Information Screen

Record Contact

HSRM enables users to record any contact made with the Veteran, a community provider, or any other person or organization regarding the referral. Anyone with access to the referral can view this information.

» *Note: The Veteran's preferred method of communication appears in a read-only field in the Referral Processing Information section of the Referral Details screen. When reaching out to a Veteran, community providers should view this field first.*

To record contact about a referral:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Select the referral from the **Referral List**.
3. Select the **Action Menu** icon ⋯ (also called link Referral List action menu by screen readers) on the **Patient Banner**.
4. Select **Record Contact** from the drop-down menu. The **Record Contact** screen appears.

Exhibit 32: Action Menu – Record Contact

5. Enter the relevant information regarding the contact and select the **Update** button [Update] to save changes.

Exhibit 33: Record Contact – Record Contact Screen

View Additional Referral Information

Users can view additional information about a referral on the Additional Referral Information screen. This screen displays contacts, appointments, referral documents, care coordination documents, referral consult factors, referral notes, and patient letters.

To view additional referral information:

1. Locate the referral (refer to the [Locate a Referral](#) section of this guide).
2. Select the **Action Menu** icon ⋯ (also called link Referral List action menu by screen readers) next to the corresponding referral row and select Additional Referral Information.
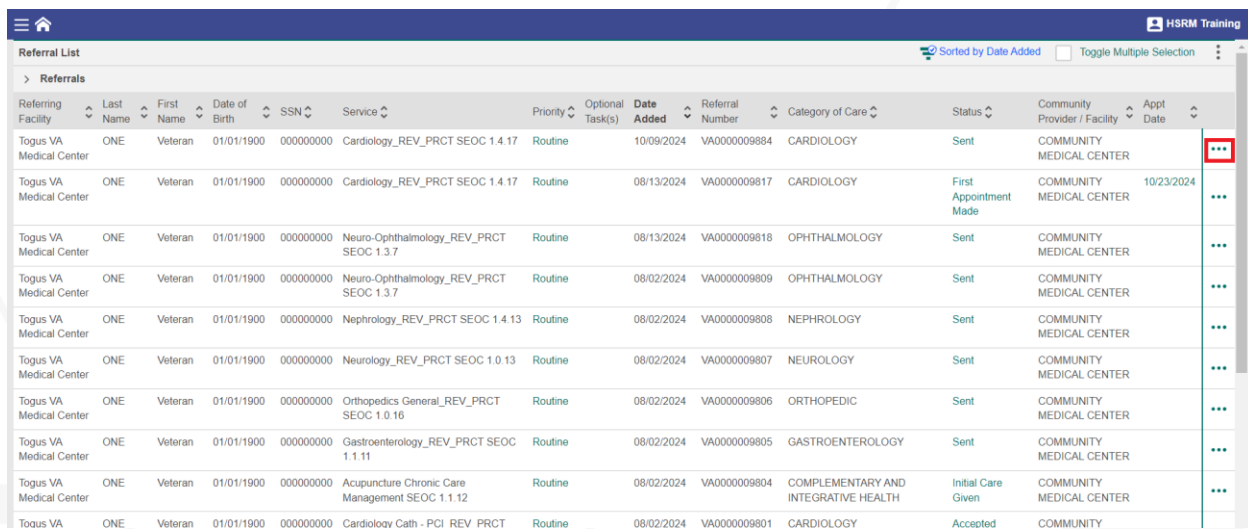
   » *Note: The Action Menu icon ⋯ (also called link Referral List action menu by screen readers) is also available from the Referral Details screen in the Patient Banner.*

Exhibit 34: Referral List – Action Menu Icon

3. The **Additional Referral Information** screen appears, showing contacts, appointments, referral documents, care coordination documents, referral consult factors, referral notes, and patient letters related to the referral. Select each to view the corresponding information.

Exhibit 35: Additional Referral Information

» *Note: Users can sort each list using the column header and advanced sorting methods.*

Working with Tasks

A task in HSRM represents a discrete action that users must complete for a Veteran's referral. Tasks minimize administrative burdens and streamline communications. They enable VA and community providers to share information without having to pick up the phone. Automatic tasks serve as reminders for submitting medical documents and precertification information, minimizing potential delays in payment.

For example, a community provider will receive an auto-generated task from VA to submit medical documentation seven days after the referral status is changed to **Initial Care Given**. Alternatively, the community provider can create a manual task to communicate with VA (e.g., to request VA to contact the Veteran or to provide additional referral documents).

Create a Task

To manually create a task:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Select the **Action Menu** icon ··· (also called link Referral List action menu by screen readers) next to the corresponding referral row, then select **Add Task**.

> » *Note: The Action Menu icon* ⋯ *(also called link Referral List action menu by screen readers) is also available from the Referral Details screen in the Patient Banner.*

Exhibit 36: Action Menu – Add Task

3. The **Task Edit** screen appears.
4. Enter the appropriate information (e.g., **Task Item**, **Priority**, **Status**, **Comments**) to create the task. **Task Item**, **Priority**, **Status, Due Date**, and **Start Date** fields are mandatory (as denoted by the red asterisk) and users can edit them. *Screen readers identify these fields as* **Star** *and* **Required**.

Exhibit 37: Task Edit Screen

5. Select the **Magnifying Glass** icon 🔍 (also called lookup graphic by screen readers) within each field to view and select available options.
6. Select the **Update** button [Update] to save the task information.

View or Edit a Task

The Task List displays all task items for the facility. From the Task List, users can review and edit an item.

To view the Task List:

1. Select the **Menu** icon ≡ (also called link menu for screen readers) and select **Task List** from the drop-down options.

Exhibit 38: Menu – Task List

2. Locate the task on the **Task List**. Users can sort the Task List in the same way that they would sort the Referral List, by selecting the column headings or by sorting tasks with the Advanced Sort hyperlink.

Users can also filter their Task List to locate specific tasks. There are several filtering criteria, including Task Item, Date To/From, Last Name Start/End, Category of Care, Assigned User, Assigned Group, Assigned Facility, and more.

To filter the **Task List**:
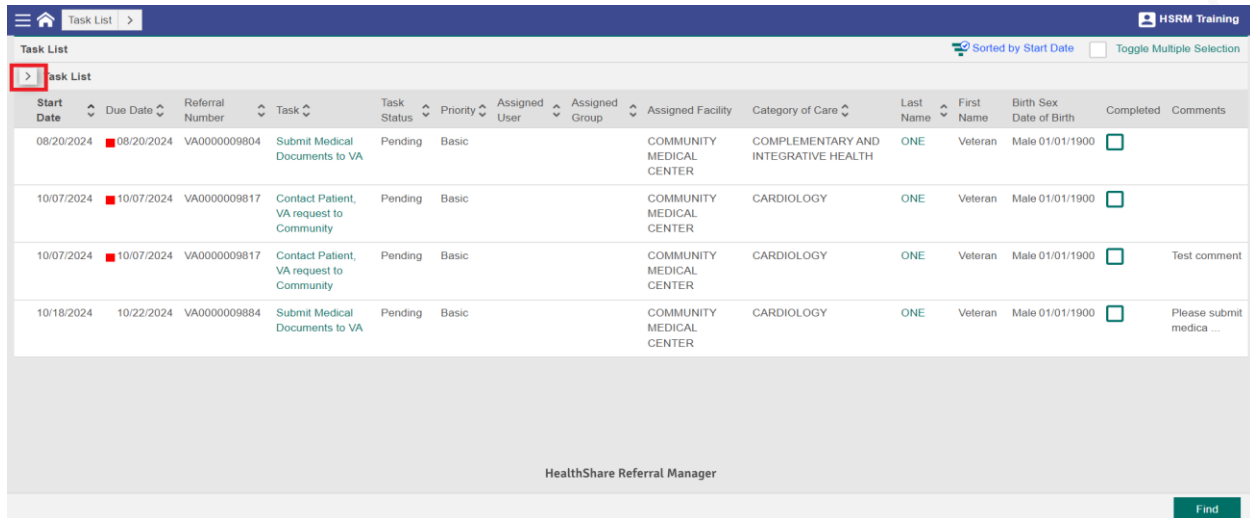
1. Select the arrow icon ⌐ at the top of the **Task List** to open the filtering options.

Exhibit 39: Task List Arrow Icon

2. Enter the desired filtering criteria.

Exhibit 40: Task List Filters

3. Select the **Find** button to filter the **Task List** by the chosen criteria.

To view and edit a task:

1. Select the task title in the **Task** column to navigate to the **Task Edit** screen (data in the **Task** and **Last Name** columns are displayed as hyperlinks). The **Task Edit** screen appears.

» *Note: Overdue tasks have a red indicator in the Due Date column (screen readers read the date to indicate overdue tasks).*

Exhibit 41: Task List Screen

2. Review the task, including any comments.
3. Edit the **Priority** and **Status** fields as needed. To do this, select the **Magnifying Glass** icon (also called lookup graphic by screen readers) within each field and select the appropriate option.
4. Edit the **Comments** field.

Exhibit 42: Task Edit Screen

5. Select the **Update** button ▭Update▭ at the bottom right to save the task information and go back to the **Task List**.

Exhibit 43: Task List

6. After editing the task, users can complete the task by selecting the task row to access the section of the referral where they can complete the task.

Exhibit 44: Referral Details Screen

7. When users update a task, they can mark the task as complete.

Mark a Task Complete

From the Task List, users can mark an item as complete.

To mark a task as complete:
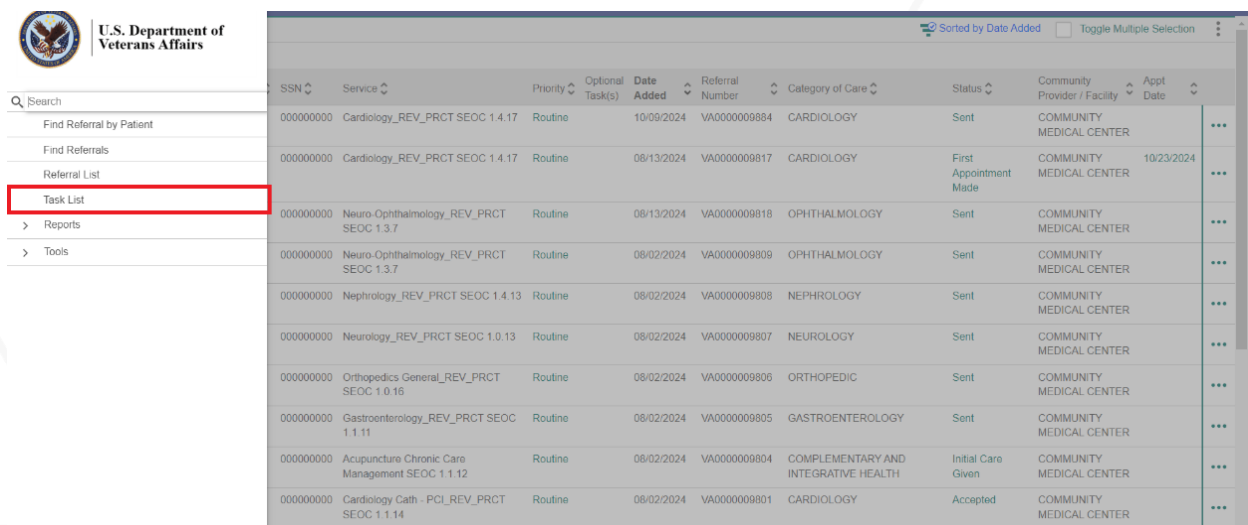
1. Select the **Menu** icon ☰ (also called link menu for screen readers) and select the **Task List** option.

Exhibit 45: Menu – Task List

2. Locate the task on the **Task List**.
3. Select the box in the **Completed** column of the task.

   » *Note: You may also use the Breadcrumb Trail to return to the Task List and mark the task as Complete.*

Exhibit 46: Task List Screen

Requests for Services

If a community provider needs a new referral from VA, either because the referral is expiring or the provider needs to offer a service not included in the SEOC, the provider must submit a request for services (RFS) from an existing referral. The user can upload a completed and signed Request for Services form into HSRM or use the online Request for Services Questionnaire. The online form will allow for the electronic signature of the RFS and can be accessed from two security groups:

» **Community Staff** – Allows provider staff to access and create an RFS
» **Community Care Provider** – Allows credentialed providers to access, create, and sign an RFS.

To upload a signed **Request for Services** form in HSRM, please see the Manage Documents section of this guide.

To use the online **Request for Services Questionnaire**, the community provider facility must have a user provisioned with the Community Care Provider HSRM security group to electronically sign the online RFS form. To receive access to the Community Care Provider HSRM security group and electronically sign the online RFS, the user must be a credentialed provider (i.e., MD, DO, NP, PA, DPT, DC, Acupuncturist, Massage Therapist, or Respiratory Therapist) and have an active ID.me account. A Community Staff user can also complete the online RFS form and send it to the Community Care Provider user for signature.

To obtain access to the Community Care Provider security group, please ask the CCRA HSRM administrator for your facility to submit an updated EUT to hsrmsupport@va.gov.

To complete the online Request for Services Questionnaire:

1. Select the **Action Menu** ••• icon on the corresponding referral row or from the **Patient Banner** on the **Referral Details** screen.

Exhibit 47: Action Menu

2. Select Requests for Services.

Exhibit 48: Requests for Services Option

3. On the **Requests for Services** screen, select the **New** icon ➕ New .

» *Note: Any Requests for Services previously submitted will appear on the Requests for Services screen.*

Exhibit 49: Requests for Services New Icon

4. On the Questionnaire List screen, select Request for Services Questionnaire.

Exhibit 50: Questionnaire List Screen

5. Complete all required fields and details of the request.

Exhibit 51: Requests for Services Questionnaire

6. Select the checkbox for the **Requesting Provider Signature** (Community Care Provider security group user only).
   a. If the RFS is completed by a Community Staff user, the form must be routed via the drop-down option to a Community Care Provider user for signature before submission to VA.
7. Select **Sent to VA** from the **Request Status** drop-down list and submit your request by selecting the **Apply** Apply or **Update** button Update .

Exhibit 52: Requesting Provider Signature and Request Status

8. Selecting the **Update** button [Update] will take you to the **Documents** screen for this referral where you can upload the documentation needed for this request. You can reach the same screen by selecting the **Add/View Documents** link on the **Referral Details** screen.

    » *Notes:*

    - *When VA has adjudicated the request, you will receive a Review Adjudicated RFS task on the Task List.*
    - *If a Community Staff user completes the RFS form and sends it to the Community Care Provider for signature, a Sign and Submit Request for Services task will appear on the Task List.*

Dental Requests for Services

To access the **Dental Request for Services** details screen, access the **Referral Details** screen.

1. Navigate to the **Referral Details** screen and select the **Action Menu** at the top-right corner of the screen.

    » *Note: The **Action Menu** can also be accessed via the **Referral List** at the end of the referral row.*

Exhibit 53: Action Menu

2. Select Dental Requests for Services from the drop-down menu. The Dental Requests for Services screen appears.

Exhibit 54: Dental Requests for Services Option

3. The Dental Requests for Services screen appears. Select the Dental Request for Services row you wish to view.

Exhibit 55: Dental Requests for Services Screen

> » *Note: CTB Dental Care Plan displays on the Dentals Requests for Services screen under the Dental Care Plan column.*

4. The **Dental Request for Services Details** screen appears. Users can view the **Dental Request for Services** information imported from CTB.

Exhibit 56: Dental Request for Services Details Screen

> » *Notes:*
>   - *Dental Request for Services Details screen fields are read only.*

- *Users can see CDT codes with their approval status by selecting the CDT Codes hyperlink on the HSRM Dental RFS screen.*
- *Users can print the Veteran Dental RFS Letter and Provider Dental RFS Letter by selecting the Component Menu icon (vertical ellipsis) in the upper-right corner of the screen beneath the Action Menu icon (horizontal ellipsis).*

Community Provider Precertification

There may be occasions when a referral requires VA to call TPPs for precertification for patients who are VHA beneficiaries with OHI.

Identify Referrals Requiring OHI Precertification

If a referral requires OHI precertification, it will have either **PRCT REV** or **PRCT** listed in the SEOC name.

1. To view precertification details, select the row of the referral.

Exhibit 57: Referral List – Precertification Referral

View Precertification Instructions

Once on the Referral Details screen, community providers can view the precertification information on:

» The **Service/s Requested** section, titled Precertification.

» The **Offline Referral Form** under the Precertification section. Select the Component Menu (vertical ellipsis located top right of the screen), and, under Print, select Offline Referral Form.

» The **Billing and Other Referral** Information sheet is under the Precertification section. Select the Component Menu, then select Billing and Other Referral Information under Print.

Exhibit 58: Referral Details – Precertification Instructions

» *Note: The Precertification section instructs community providers to navigate to the [Community Care website](#) for further notification details. You can either copy and paste the text link into your web browser, or, if available, directly select the link to open the page.*

View Community Care Precertification Web Page

Once on the Community Care precertification web page, please read the precertification notification instructions.

1. To identify if a specific service requires precertification, scroll down to SEOC Billing Code Information, and select the link titled **License for Use of Current Procedural Terminology**.

Exhibit 59: Community Care Precertification Requirements Web Page

2. Select **Accept** on the bottom of the **Community Care End User Agreement Web Page**. Selecting **Accept** will download the SEOC precertification code list to your computer.

Exhibit 60: Community Care End User Agreement Web Page – Accept

View SEOC Billing Codes for Precertification

Once you open the file titled "SEOC-PRCT_Code_List.xlsx" from your downloads, you will be able identify which billing codes require precertification. Any billing codes in the PRCT Billing Codes column in red require precertification.

To locate a specific SEOC or billing code:

1. Use the CTRL+F keyboard shortcut to pull up the search option in Excel.
2. Enter either the specific SEOC name or billing code to locate it in the document.

> » *Note: If a service requires precertification, you will need to create a manual task in HSRM for the Revenue team.*

Exhibit 61: SEOC Precertification Excel Document

Add a Precertification Notification Task

To add a task:

1. From the **Referral Details** screen, select the **Action Menu** (horizontal ellipsis located at the top right of the screen), then select **Add Task**.

Exhibit 62: Action Menu – Add Task

» On the **Task Edit** screen, you can add a manual task for another user, a group of users, or yourself. Below are the different fields on the **Task Edit** screen:

- **Task Item** – This is a mandatory field and needs to be selected from a list, as noted by the magnifying glass. Since this is a task for the Revenue team, select Provider Precert Notification.
- **Priority** – This is another mandatory field that has a list. It is already filled in as Basic.
- **Status** – The status is preset to Pending since this is a new task. It is mandatory as well.
- **Assign Group** – Because this is a task for HSRM Revenue staff, you need to assign the task to the Revenue Utilization Review (RUR) Nurse group.

2. Add comments to specify for which service and billing code number you are requesting the precertification, appointment date, diagnosis, and associated NPI number.
3. Save the changes. Remember, selecting **Update** saves the data and will only be available when all mandatory fields are complete.
4. Select **Update**.
5. VA Revenue staff members can now view the task. You may proceed with the service. There is no requirement to wait for VA or TPP approval or response prior to performing the test, procedure, or admission included as part of the SEOC referral.

Exhibit 63: Task Edit

» *Note: The Precertification section of the VA Community Care web page also includes a link to the Third-Party Payer Precertification Form. If necessary, community provider users can download, complete, and submit the form in HSRM. Be sure to assign the TPP Pre-Cert Form document type to the form on the Add Document page for the respective referral.*

Canned Text

Canned text automatically populates text fields with predefined text items. Selecting the Canned Text icon ⁺≡ (also called canned text graphic by screen readers) will display existing items in the canned text library. Users can create their own canned text to populate any text field that contains the Canned Text icon ⁺≡ .

To create canned text:

1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Navigate to the **Referral Processing Information** section. In the Comments box, enter the text you wish to save, highlight it, and then select the Plus icon. This will take you to the Canned Text screen.
3. On the **Canned Text** screen, enter a code to assign to the text. Select the Update button at the bottom right to save the canned text.

Generating Reports

HSRM can generate reports that display the types of services referred to a specific community provider/facility, as well as the current status of the referrals sent during the selected period.

Exhibit 64: Report Types

Report Type	Documentation
Download RFS Form	This paper RFS form may be uploaded into HSRM.
HSRM Reports Reference Guide	This report provides VA staff and community providers with the definitions and uses of all the reports to which they have access.
Veterans Appointment Report	This report displays all appointments at a specified VA or community provider facility. It allows VA staff, VA supervisors, and community providers to review the recent and upcoming Veteran appointments that are scheduled in HSRM. Report fields include Appointment Date, Appointment Status, Level of Care Coordination, and Referral Details.

To run a report:

1. Select the **Menu** icon ☰ (also called link menu for screen readers), select **Reports**, and choose **Veteran Appointments Report**.

Exhibit 65: Menu – Veteran Appointments Report

> » *Note: The HSRM Reports Reference Guide option, located in Reports, provides directions and detailed information about the report.*

2. Select the criteria needed to run the desired report from the fields available and select the Preview icon (also called "link graphic link opens Excel in a new window graphic preview" by screen readers) to run the report.

Exhibit 66: Veteran Appointments Report Parameters

3. Navigate to the report. Reports may be generated in PDF format or as Excel documents, and users can print and save them.

Billing and Other Referral Information

The Billing and Other Referral Information sheet provides community providers with additional details related to the legal authority, claims submissions instructions, precertification requirements, and provision of prescriptions and durable medical equipment for the referral. Community providers can access this information sheet directly from the Referral Details screen. The information is also available on the Offline Referral Form. The information sheet will contain appropriate content based on the program authority. For example, a referral authorized as a VCA, CCN, or 1728 service-connected emergency care referral would contain content specific to that program.

To access the Billing and Other Referral Information sheet:
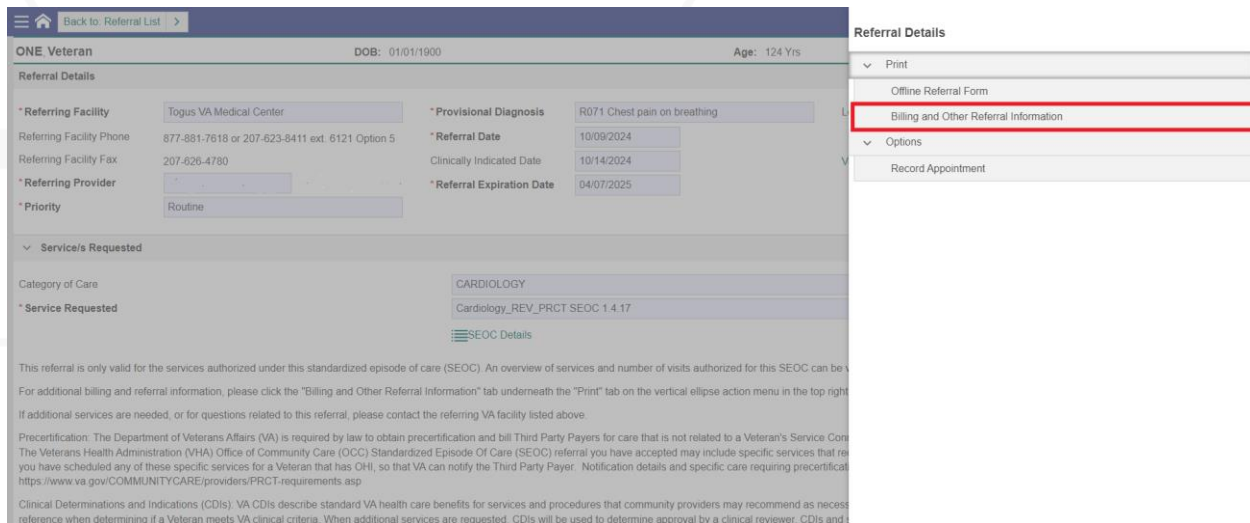
1. Locate the referral (refer to the Locate a Referral section of this guide).
2. From the **Referral Details** screen, select the **Component Menu** icon ⋮ (also called Referral List component menu button by screen readers), then select **Billing and Other Referral Information**.

Exhibit 67: Component Menu – Billing and Other Referral Information

3. The **Billing and Other Referral Information** sheet appears, and users can print, download, and save it as a PDF.

Exhibit 68: Component Menu – Billing and Other Referral Information Sheet

Clinical Viewer

The Clinical Viewer portal offers users a comprehensive view of a Veteran's medical documentation history in HSRM. Categories of information available in Clinical Viewer include a clinical summary of the patient's history, allergies, immunizations, any medications, lab results, procedures, and more. Clinical Viewer gives HSRM users a secure, centralized source of medical history and patient details for a Veteran in HSRM.

Clinical Viewer is accessible from the Referral Details screen for any Veteran that has relevant data in the system. To access Clinical Viewer from the **Referral Details** screen, users can either select the **Clinical Viewer** icon 〰️ on the **Patient Banner** or follow the **Veteran's Medical Record** link in the **Referral Details** section.

» *Note: Clinical Viewer is unavailable for users in the Community View Only security group.*

To access Clinical Viewer:
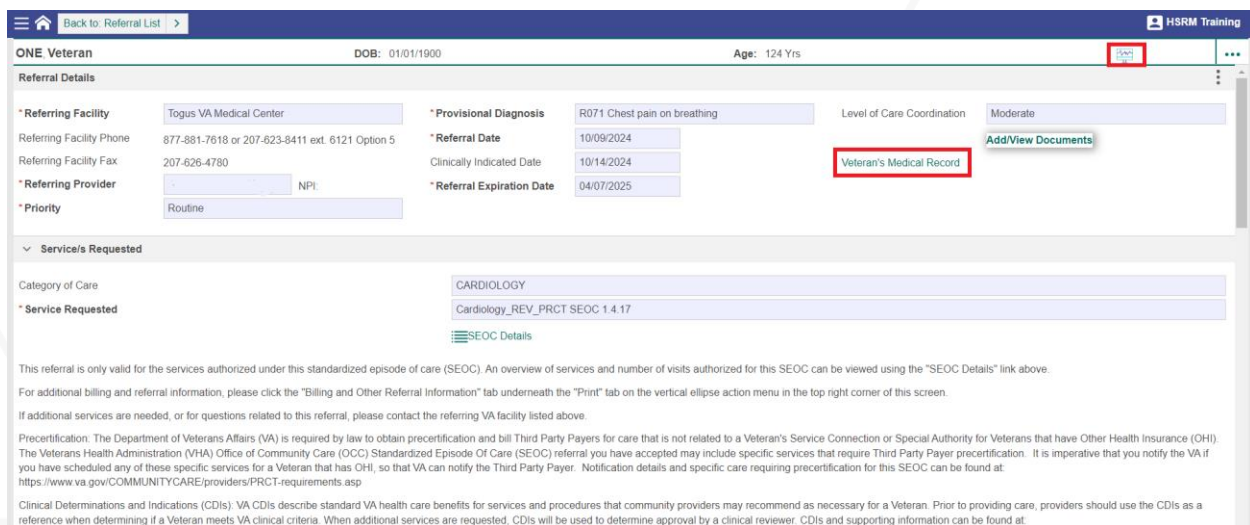
1. Locate the referral (refer to the Locate a Referral section of this guide).
2. Select the **Clinical Viewer** icon on the Patient Banner or the **Veteran's Medical Record** link on the **Referral Details** screen.

Exhibit 69: Referral Details Screen

3. If the user selects the **Clinical Viewer** icon, a menu will open. Select the Veteran's Medical Record option. Alternatively, if the user selects the **Veteran's Medical Record** link in the Referral Details portion of the screen, it will bypass the menu and take them directly to Clinical Viewer.

Exhibit 70: Clinical Viewer Access Menu

4. The Clinical Viewer page will open, displaying patient medical history in HSRM. The categories of information available for viewing are in a list called the **Chartbook**. Select one of the categories in the Chartbook to view it.

Exhibit 71: Clinical Viewer Home Screen

» *Note: All information in Clinical Viewer is read-only, so users will not be able to print or download any information or documentation. Attempting to save images or data from Clinical Viewer may present security risks. Users must remove any saved data or images from their device after use.*

Additional Resources

Contact the HSRM Help Desk for support. Open a ticket by phone at (844) 293-2272 or email hsrmsupport@va.gov. Additionally, the following websites provide quick and easy access to commonly needed materials:

» VA Community Care Website
» HSRM Support Points of Contact List
» Community Provider Information Sheet

Appendix A: Acronyms and Abbreviations

Exhibit 72: Acronyms and Abbreviations

Acronym or Abbreviation	Definition
C6	Community Care Clinical Coordination Contact Center
CBOC	Community-Based Outpatient Clinic
CCN	Community Care Network
CCRA	Community Care Referral and Authorization
EDIPI	Electronic Data Interchange Personal Identifier
EOC	Episode of Care
EUT	End User Tracker
HSRM	HealthShare Referral Manager
ICN	Integration Control Number
IT	Information Technology
NPI	National Provider Identifier
OHI	Other Health Insurance
OIT	Office of Information and Technology
PPMS	Provider Profile Management System
RFS	Request for Services
RUR	Revenue Utilization Review
SAR	Secondary Authorization Request
SEOC	Standardized Episode of Care
SSN	Social Security Number
TPA	Third-Party Administrator
TPP	Third-Party Payer
TRAIN	Training Finder Real-time Affiliate Integrated Network
VA	U.S. Department of Veterans Affairs
VAMC	Veterans Affairs Medical Center
VCA	Veterans Care Agreement
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network

Appendix B: Revision History Table

Exhibit 73: Revision History Table

Version	Date	Author	Description
0.1	11/01/2018	CCRA Training Team	Initial Draft
0.2	11/01/2018	Sam Weaver	QC Review
0.3	11/01/2018	Jennifer Cote	JPM/PQAL Review
0.4	11/01/2018	Susan Burke	PM Review
0.5	01/14/2019	Sam Weaver	Template Update
0.6	01/14/2019	Jennifer Cote	JPM/PQAL Review
1.0	01/14/2019	Susan Burke	PM Review
1.1	03/25/2019	Allyson Newman	Updates from 4.0 • New screenshots throughout • Alt Text added • Text updates throughout • Added Section 3.1.2: Billing and Other Referral Information • Added screenshot of Component Menu with Billing and Other Referral Information option highlighted • Added screenshot of Billing and Other Information Sheet • Updated HSRM Help Desk phone number and TTY number
1.2	03/27/2019	Kathryn Hooker	QC Review
1.3	05/08/2019	Jennifer Cote	JPM/PQAL Review
1.4	06/13/2019	Allyson Newman	Updates for Build 6.0 • New screenshots throughout • Expanded Requests for Services section with screenshots • Minor punctuation • Added a report
1.5	06/17/2019	Rachael Levine	Training Team Lead Review
1.6	06/17/2019	Allyson Newman	Updates to screenshots, text. Added Alt text
1.7	06/17/2019	Jennifer Cote	JPM/PQAL Review

Version	Date	Author	Description
2.0	06/17/2019	Susan Burke	Program Manager Review
2.1	06/21/2019	Allyson Newman	Added PPMS Provider Search
2.2	06/24/2019	Kathryn Hooker	QC review of updates
2.3	06/24/2019	Jennifer Cote	JPM/PQAL Review
3.0	08/13/2019	Allyson Newman	Updates for Build 7.0 • New screenshots throughout • Updated Resource links • Updated footer with date • Updated Getting Access to HSRM section • Updated alt text
3.1	08/22/2019	Staci Shelley	QC Review
4.0	03/02/2020	Allyson Newman	Updates for Build 7.5 • Removed Provider Search and Additional Details section • Updated screenshots and alt text
4.1	04/28/2020	Janay Hurley	Updates for Build 8.0 • Updated Figure 5
4.2	04/29/2020	Jennifer Defreitas	Manager Review
4.3	04/29/2020	Kathryn Hooker	QC Review • Updated intro text and Appendix A • Verified links and alt text throughout
4.4	04/30/2020	Jennifer Cote	JPM/PQAL Review
5.0	05/01/2020	Susan Burke	Program Manager Review
5.1	05/26/2020	Sara Zarny	Updates for Release 9.0 • Updated figures 32, 34, and 37
5.2	05/29/2020	Janay Hurley	Training Team Lead Review
5.3	06/03/2020	Kathryn Hooker	QC review of updates
5.4	06/05/2020	Jennifer Cote	JPM/PQAL Review
6.0	06/07/2020	Susan Burke	Program Manager Review
6.1	07/30/2020	Allyson Newman	Updates for Release 10.0 • Updated figures 5, 9, 16, 17, 20, 32, 33, 35, 37, and 39
6.2	08/11/2020	Rammy Sbeitan	Final QA Review
6.3	08/17/2020	Allyson Newman	Updated figures 9, 6, 12, 19, 22, and 24
6.4	08/17/2020	Sara Zarny	Training QA Review

Version	Date	Author	Description
6.5	08/17/2020	Janay Hurley	Training Team Lead Review
6.6	08/17/2020	Kathryn Hooker	QC Review
6.7	08/20/2020	Jennifer Defreitas	Training Manager Review
6.8	08/21/2020	Jennifer Cote	JPM/PQAL Review
8.0	09/09/2020	Susan Burke	Program Manager Review
8.1	10/26/2020	Allyson Newman	Updates for Release 11.0 • Replaced figures 18 and 19
8.2	11/04/2020	Kathryn Hooker	QC review of updates
8.3	11/16/2020	Jennifer Defreitas	Manager Review
8.4	11/17/2020	Jennifer Cote	JPM/PQAL Review
9.0	11/18/2020	Susan Burke	Program Manager Review
9.1	01/22/2021	Connor Reed	Technical Writer Review
9.2	03/10/2021	Jennifer Cote	JPM/PQAL Review
10.0	03/12/2021	Susan Burke	Program Manager Review
10.1	05/25/2021	Allyson Newman	Updates for Release 13.0 • Updated figures 2, 3, 4, 5, 12, 38, and 41 • Updated Table 1
10.2	06/09/2021	Connor Reed	QA Review for Release 13 Updates • Reviewed and updated all screenshots for PII/Privacy • Updated figures 10, 21, 22, and 24 • Included note about C6 referrals • Added Section 6: Clinical Viewer • 508 Compliance review
10.3	07/07/2021	Yasir Hashmi	Manager Review
10.4	07/12/2021	Kathryn Hooker	QC Review
10.5	07/16/2021	Jennifer Cote	JPM/PQAL Review
11.0	07/27/2021	Susan Burke	Program Director Review
11.1	08/02/2021	Connor Reed	Updated Clinical Viewer Figures 42, 43, 44
11.2	08/02/2021	Kathryn Hooker	QC Review
11.3	08/02/2021	Jennifer Cote	JPM/PQAL Review
12.0	08/02/2021	Susan Burke	Program Director Review

Version	Date	Author	Description
12.1	09/10/2021	Allyson Newman	Updates for Release 14.0 • Updated text throughout • Updated Figures 16, 17, 18, 19, 20, 31, 36, and 38 and updated alt text
12.2	09/13/2021	Connor Reed	QA of Release 14.0 Updates • Inserted figures 5 and 6 • Updated Veteran Appointment Preference Language • Inserted Section 4.1.3
12.3	09/16/2021	Yasir Hashmi	Manager Review
12.4	09/20/2021	Lorelei Cox	Project Manager Review
12.5	09/20/2021	Kathryn Hooker	QC Review
12.6	09/23/2021	Jennifer Cote	JPM/PQAL Review
12.7	09/24/2021	Jennifer Parker	DPM Review
13.0	10/08/2021	Susan Burke	Program Director Review
13.1	12/08/2021	Allyson Newman	Initial review of updates needed for 15.0 Updated text and added comments
13.2	12/13/2021	Allyson Newman	Updates for Release 15.0 • Updated figures 2, 3, 20, and 21
13.3	12/16/2021	Connor Reed Allyson Newman	Updates for Release 15.0 • Added section 13 about precertification process • Updated Figure 4
13.4	12/22/2021	Yasir Hashmi	Manager Review
13.5	12/27/2021	Lorelei Cox	Project Manager Review
13.6	12/28/2021	Kathryn Hooker	QC Review
13.7	12/29/2021	Jennifer Cote	JPM/PQAL Review
14.0	01/17/2022	Susan Burke	Program Director Review
14.1	03/03/2022	Allyson Newman	Initial review of updates for 16.0
14.2	03/03/2022	Allyson Newman	Updates for Release 16.0 • Updated figures 7 and 11
14.3	03/07/2022	Connor Reed	Updates for Release 16.0 • Added the Find Referral by Patient Section
14.4	03/21/2022	Lorelei Cox	Project Manager Review

Version	Date	Author	Description
14.5	03/23/2022	Kathryn Hooker	QC review of updates
14.6	03/25/2022	Jennifer Cote	Project Manager – PMO Review
15.0	04/05/2022	Susan Burke	Program Director Review
15.1	05/13/2022	Allyson Newman	Initial review of updates for 17.0
15.2	05/16/2022	Allyson Newman	Updates for Release 17.0 • Updated figures 14, 23, and 24 • Updated text throughout
15.3	05/27/2022	Connor Reed	QC of Release 17.0 updates, privacy edits, and 508 compliance validation
15.4	05/27/2022	Yasir Hashmi	Manager Review
15.5	05/31/2022	Lorelei Cox	Project Manager Review
15.6	06/02/2022	Kathryn Hooker	QC review of updates
15.7	06/03/2022	Jennifer Cote	Project Manager – PMO Review
16.0	06/22/2022	Susan Burke	Sr. Program Director Review
16.1	09/08/2022	Allyson Newman	Updates for Release 19.0 • Updated text throughout • Updated Figures 2-7, 10, 11, 13, 14, 18, 20, 23, 24, 26, 30, 32, 34, 36, 40, 41, 43, 44, 48, 50, 52, 54, and 56
16.2	09/12/2022	Connor Reed	Review of updates for Release 19.0
16.3	10/03/2022	Lorelei Cox	Project Manager Review
16.4	10/05/2022	Kathryn Hooker	QC review of updates
16.5	10/25/2022	Allyson Newman	Updated screenshots with new CV icon throughout
16.6	10/26/2022	Connor Reed	Review of updates
16.7	11/14/2022	Kathryn Hooker	QC Review
16.8	11/15/2022	Jennifer Cote	PMO Project Manager Review
17.0	11/17/2022	Susan Burke	Sr. Program Director Review
17.1	01/30/2023	Connor Reed	Release 20.0 updates
18.0	02/08/2023	Susan Burke	Sr. Program Director Review
18.1	03/15/2023	Allyson Newman	Release 21.0 Updates • Replaced figures and updated alt text: 1-5, 7-8, 15, 19, 28, 30, 34, 37-40, 42-47, 53
18.2	03/17/2023	Connor Reed	Review of 21.0 Updates

Version	Date	Author	Description
18.3	03/20/2023	Yasir Hashmi	Manager Review
18.4	04/20/2023	Kathryn Hooker	QC Review
18.5	05/01/2023	Jennifer Cote	PMO Project Manager Review
18.6	05/01/2023	Ariel Daza	Deputy Program Manager Review
19.0	05/03/2023	Jennifer Parker	Sr. Program Manager Review
19.1	06/07/2023	Allyson Newman	Release 22.0 Updates • Replaced figures 11, 12, and 13
19.2	06/07/2023	Connor Reed	Review of Release 22.0 updates
19.3	06/20/2023	Yasir Hashmi	Manager Review
19.4	06/20/2023	Lorelei Cox	Project Manager Review
19.5	06/26/2023	Kathryn Hooker	QC Review
19.6	07/03/2023	Jennifer Cote	PMO Project Manager
19.7	07/05/2023	Ariel Daza	Deputy Program Manager Review
20.0	07/10/2023	Jennifer Parker	Sr. Program Manager Review
20.1	09/26/2023	Allyson Newman	Release 23.0 Updates • Replaced figures 10, 11, 12, 19, 20, 21, 27, 31, 33, 35, 51, 53, 55, and 56
20.2	10/02/2023	Alex Hines	Review of Release 23.0 updates
20.3	10/16/2023	Yasir Hashmi	Manager Review
20.4	10/18/2023	Lorelei Cox	Manager Review
20.5	10/19/2023	Kathryn Hooker	QC Review
20.6	10/25/2023	Jennifer Cote	PMO Project Manager Review
20.7	10/25/2023	Ariel Daza	Deputy Program Manager Review
21.0	11/03/2023	Jennifer Parker	Sr. Program Manager Review
21.1	02/09/2024	Allyson Newman	Release 24.0 updates • Added RFS section • Added Reports section
21.2	02/21/2024	Yasir Hashmi	Manager Review
21.3	02/26/2024	Lorelei Cox	Project Manager Review
21.4	02/29/2024	Marwan Lavoie	QC Review
21.5	03/14/2024	Ariel Daza	Deputy Program Manager Review
21.6	03/15/2024	Jennifer Cote	PMO Project Manager Review
21.7	03/15/2024	Jennifer Parker	Sr. Program Manager Review

Version	Date	Author	Description
21.8	03/22/2024	Yasir Hashmi	Added RFS details under section 4.11
21.9	03/22/2024	Lorelei Cox	Project Manager Review
21.10	03/22/2024	Ariel Daza	Deputy Program Manager Review
22.0	03/22/2024	Jennifer Cote	PMO Project Manager Review
22.1	05/01/2024	Kathryn Hooker	QC review of section 4.11 and RFS details
22.2	06/04/2024	Allyson Newman	Release 26.0 updates • Updated screenshots throughout-Figures 1, 11, 14, 27, 31, 33, 35, 47, 53, 57 • Updated VHA Train link on pg. 19
22.3	06/05/2023	Yasir Hashmi	Manager Review
22.3	06/06/2024	Lorelei Cox	Project Manager Review
22.4	06/13/2024	Marwan Lavoie	QC Review • Updated Appendix A and acronyms throughout
22.4	06/13/2024	Marwan Lavoie	QC Review
22.5	06/18/2024	Jennifer Cote	PMO Project Manager Review
22.6	06/24/2024	Ariel Daza	Deputy Program Manager Review
23.0	06/25/2024	Jennifer Parker	Sr. Program Manager Review
23.1	07/11/2024	Marwan Lavoie	Transferred document to new template
23.2	07/16/2024	Kathryn Hooker	QC review of document transfer
23.3	10/21/2024	Allyson Newman	Release 27.0 Updates • Updated date and footer • Added Screen Essentials section • Updated Exhibits 2-67 • Updated TOC, Table of Exhibits
23.4	10/31/2024	Yasir Hashmi	Manager Review
23.5	11/01/2024	Lorelei Cox	Project Manager Review
24.6	11/01/2024	Marwan Lavoie	QC Review • Formatting • 508 compliance
24.7	11/07/2024	Ariel Daza	Deputy Program Manager Review
24.8	11/07/2024	Kathryn Hooker	QC review and formatting corrections
25.0	11/07/2024	Jennifer Cote	PMO Project Manager Review