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1 Introduction

1.1 Project and Solution Overview

HealthShare Referral Manager (HSRM) 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 VA 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. HSRM is an integral component of the 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 as well as enhanced patient experience for Veterans.

1.2 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.
2 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.

Figure 1: HSRM Referral Lifecycle

The referral lifecycle model in Figure 1 shows the steps occurring in the following order, with VA performing steps 1 and 2, 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 to accept or reject the referral.
- Step 4 is to record the appointment.
- Step 5 is confirmation of the first appointment.
- Step 6 is performed by VA and completes the EOC by receiving the final medical documents.

*The status of the referral automatically changes in Health Share Referral Manager once the step is completed.

The referral lifecycle model in Figure 1 shows the steps occurring in the following order, with VA performing steps 1 and 2, 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 to accept or reject the referral.
- Step 4 is to record the appointment.
- Step 5 is confirmation of the first appointment.
- Step 6 is performed by VA and completes the EOC by receiving the final medical documents.

3 Accessing HSRM

Staff who typically process referrals, accept and reject referrals, record appointments, and share medical documentation with VA will 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 webpage.

1. Attend a two-hour 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 (11 modules), or refer to this guide to learn how to use HSRM.

2. Refer to the ID.me user 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 Community Care Referral and Authorization (CCRA) website at https://ccracommunity.va.gov.

   » Note: Users must log in to HSRM at least once every 60 days to maintain their access. If your HSRM account is deactivated, email hsrmsupport@va.gov to request reactivation.

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 using HSRM.

4 Working in HSRM

4.1 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 what is, in effect, 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 Referral Search or Find Referral by Patient features.

4.1.1 Column Heading Sort

Users can sort 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 sorting column headings:

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.
4.1.2 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”).

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. The referrals are now sorted according to the sort criteria. Select the row of the relevant referral to view the Referral Details screen.
4.1.3 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 Multiple Statuses field is mandatory. Users can choose from Accepted, First Appointment Made, Initial Care Given, Rejected, and Sent.

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.
3. Enter information in any field within the **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).

4.1.4 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, gender, 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.

3. Populate the required fields (i.e., Last Name, First Name, and Date of Birth) as well as any other optional fields (if known). Select the Find button to generate the search.
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.

4.2 **Manually Change the Status of a Referral**

The referral status shows where a referral is in its lifecycle. As shown in Figure 1, the possible statuses are Approved, Sent, Accepted, Rejected, First Appointment Made, Initial Care Given, and EOC Complete. Community providers should only use Accepted, Rejected, First Appointment Made, and Initial Care Given.
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.
3. Navigate to the Referral Processing Information section on the Referral Details screen. Select the Status field and select the new status. Community providers can change the referral status to Accepted, Rejected, First Appointment Made (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.

Figure 10: Referral Details – Status Field

4. Enter any relevant comments regarding the referral in the Comments field of the Referral Processing Information section.
5. Select the Update button to save changes and return to the previous screen. Select the Apply button 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.

4.3 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 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.

Figure 11: Referral Details – SEOC Details

4. Review the Procedural Overview for the SEOC.
4.4 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.

4.4.1 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) of the Referral Details section, then select Offline Referral Form from the Print drop-down menu.
4. The **Offline Referral Form** appears in a new browser tab and users can print, download, and save the form.

*Figure 14: Offline Referral Form*

![Offline Referral Form](image)

4.4.2 **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).
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.

4. The **Offline Referral Form** appears in a new browser tab.
4.5 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 greatly enhances the accuracy of patient documentation. HSRM accepts most file types, including JPG, BMP, PNG, Microsoft Office, and PDF. JPG and PDF files display in the preview section. There are no limitations on file size.

4.5.1 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.
4.5.2 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.

Figure 18: Referral Details – Add Documents to a Referral

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.

Figure 19: Add Document Screen
6. Select the **Upload** button 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/SAR**. This will trigger an automatic task for VA to review the document.

8. Select the **Update** button 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.

### 4.6 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.

» *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.
3. 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.
4. Select Options and Record Appointment.

![Figure 20: Referral Details – Record Appointment](image)

5. Enter the appropriate information (e.g., **Service Requested**, **Appointment for**, **Scheduling Method**, **Date/Time**. Additionally, if the referral is in Community Care Network (CCN) 1 – 6, 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.**
6. 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.

### 4.6.1 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.

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

![Record Appointment Screen – PPMS Provider Search](image)

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.

![Record Appointment Screen – PPMS Provider Search](image)
3. Select the **Find** button to connect directly to **PPMS** to find the provider with the designated NPI.

*Figure 23: PPMS Provider Search Screen – NPI Search*

4. Select the appropriate provider.

*Figure 24: PPMS Provider Search Screen – NPI Search Results*
Figure 25: Record Appointment Screen

» **Note:** 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.

5. Select the **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**.

» **Note:** If there is an appointment record 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.

» **Note:** 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.

Once a user records an appointment in HSRM, the Veteran will receive an email notification. The email will have the date and time of the appointment and the provider’s details, including the provider’s name, facility name, facility address, and phone number (if known). Veterans will receive a similar email notification if their provider or VAMC cancels their appointment. The cancellation email will include the appointment information and the reason for cancellation.

### 4.7 Cancel or Mark an Appointment as a No-Show

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) next to the corresponding referral row and select Additional Referral Information.
3. Locate the appointment from the **Appointments** section and select the **Status** link. The **Appointment Change Status** screen appears.

» 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 from the available options.

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).

Figure 28: Appointment Change Status Screen

7. Select the Update button to save changes.

8. The appointment status now displays as Cancelled.
4.8 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.
5. Enter the relevant information regarding the contact and select the **Update** button to save changes.

**Figure 31: Record Contact – Record Contact Screen**

### 4.9 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 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.

Figure 32: Referral List – Additional Referral Information

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

Figure 33: Additional Referral Information

  » Note: Users can sort each list using the column header and advanced sorting methods.
4.10 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).

### 4.10.1 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.*

   ![Figure 34: Action Menu Edit Task](image)

3. The Task Edit screen appears. The Patient Banner displays demographic information for the patient associated with the referral.
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*. 
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 to save the task information.

### 4.10.2 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 or edit a task:

1. Select the **Menu** icon (also called link menu for screen readers) and select **Task List** from the drop-down options.
2. Locate the task on the Task List.
3. 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).

Figure 37: Task List Screen

4. Review the task, including any comments.
5. 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.
6. Edit the Comments field.

Figure 38: Task Edit Screen

7. Select the Update button at the bottom right to save the task information and go back to the Task List.
8. After editing the task, users can complete the task by selecting the task row to access the Referral Details screen.

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

4.10.3 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.
2. Locate the task on the Task List.
3. Select the box in the Completed column of the task.

4.11 Community Provider Precertification

There may be occasions when a referral requires VA to call TPPs for precertification for patients who are VHA beneficiaries with other billable health insurance (OHI).

4.11.1 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. In order to view precertification details, select the row of the referral.
4.11.2 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 Form under the Precertification section. Select the Component Menu, then select Billing and Other Referral Information under Print.

Note: The precertification section instructs community providers to navigate to the Community Care website (https://www.va.gov/COMMUNITYCARE/providers/PRCT_requirements.asp) 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.

### 4.11.3 View Community Care Precertification Webpage

Once on the Community Care precertification webpage, please read through the precertification notification instructions.

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

![Figure 45: Community Care Precertification Requirements Webpage](image)

2. Select **Accept** on the bottom of the **Community Care End User Agreement Webpage**. Selecting **Accept** will download the SEOC precertification code list to your computer.
4.11.4 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.

If a service requires precertification, you will need to create a manual task in HSRM for the Revenue team.
4.11.5 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.

2. 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.

3. Add comments to specify for which service and billing code number you are requesting the precertification, appointment date, diagnosis, and associated NPI number.

4. Save the changes. Remember, selecting **Update** saves the data and will only be available when all mandatory fields are complete.

5. Select **Update**.

6. 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.

**Figure 49: Task Edit**

4.12 **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.

### 4.13 Generate Reports

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

**Table 1: Report Types**

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<tr>
<th>Report Type</th>
<th>Description</th>
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<tr>
<td>Download Request for Services (RFS) Form</td>
<td>This paper RFS form may be uploaded into HSRM.</td>
</tr>
<tr>
<td>HSRM Reports Reference Guide</td>
<td>This report provides VA staff and community providers with the definitions and uses of all reports they have access to.</td>
</tr>
<tr>
<td>Veteran Appointments Report</td>
<td>This report displays all the 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.</td>
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</table>

To run a report:

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

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

### 4.14 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 Veterans Care Agreement, Community Care Network, 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.

![Figure 52: Component Menu – Billing and Other Referral Information](image)

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

![Figure 53: Component Menu – Billing and Other Referral Information Sheet](image)
5 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. The Clinical Viewer icon is available on the Patient Banner to access patient data.

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 of the Referral Details screen.

Figure 54: Referral Details Screen – Clinical Viewer Icon

3. A menu will open. Select the option beginning with HIE DATA.

Figure 55: 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.
» Note: All information in Clinical Viewer is read-only, and 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, and users must remove any saved data or images from their device after use.

6 Additional Resources

Contact the HSRM Help Desk for support. Open a ticket by phone at 1-844-293-2272 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

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<td>C6</td>
<td>Community Care Clinical Coordination Contact Center</td>
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<td>Community-Based Outpatient Clinic</td>
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<td>EDIPI</td>
<td>Electronic Data Interchange Personal Identifier</td>
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<td>Episode of Care</td>
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<td>Health Information Exchange</td>
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<td>Provider Profile Management System</td>
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<td>Request for Services</td>
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<td>RUR</td>
<td>Revenue Utilization Review</td>
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<tr>
<td>SAR</td>
<td>Secondary Authorization Request</td>
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<td>SEOC</td>
<td>Standardized Episode of Care</td>
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## Appendix B: Revision History Table

*Table 3: Revision History Table*

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| 6.3     | 08/17/2020 | Allyson Newman        | » Updated Figure 9  
» Updated Figure 6  
» Updated Figure 12  
» Updated Figure 19  
» Updated Figure 22  
» Updated Figure 24 |
| 6.4     | 08/17/2020 | Sara Zarny            | Training QA Review                                                          |
| 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 Figure 18 and added alt text  
» Replaced Figure 19 and added alt text  
» Updated text throughout  
» Updated Table of Contents  
» Updated Table of Figures  
» Updated Table of Tables |
| 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                                                      |
|         |            |                       | » Updated title page to reflect Release 12.0 with no changes  
» Updated footer to reflect version review and review date |
| 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 text throughout  
» Updated Figure 2  
» Updated Figure 3  
» Updated Figure 4  
» Updated Figure 5  
» Updated Figure 12  
» Updated Figure 38  
» Updated Figure 41  
» Updated Table 1 |
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| 10.2    | 06/09/2021 | Connor Reed       | QA Review for Release 13 Updates  
» Reviewed and updated all screenshots for PII/Privacy  
» Updated Figure 10  
» Updated Figure 21  
» Updated Figure 22  
» Updated Figure 24  
» Updated language throughout  
» Included note about C6 referrals  
» Added Section 6: Clinical Viewer  
» QA of updates  
» 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                                                      |
| 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  
» Updated TOC and TOE |
| 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 |
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| 13.2    | 12/13/2021 | Allyson Newman | Updates for Release 15.0  
  » Updated Figures 2, 3, 20, and 21  
  » Updated text throughout         |
| 13.3    | 12/16/2021 | Connor Reed    | Updates for Release 15.0  
  » Added section 13 about precertification process  
  » Updated Figure 4  
  » Updated text    |
| 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                                                    |
| 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                                                    |