## Revision History

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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 midnight to 4:00 a.m. During this time, you 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 occur in the following order, with VA performing steps 1 and 2, and the 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**

3.1. **Getting Access to HSRM**

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

In order to be eligible to be an HSRM user, your facility must:
1. Have an active partnering agreement with one or more VAMC.
2. Reach out to the VAMCs you partner with to let them know of your interest in HSRM and determine the best timing for your deployment.

If your facility meets these requirements, you may proceed with HSRM registration. 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) or refer to this guide to learn how to use HSRM.
2. Reference the ID.me User Guide to sign up for an ID.me account at the ID.me website.
3. One team member from your organization will fill out the End User Tracker with all the names and email addresses of end users requiring access to HSRM. Please ensure the email addresses listed match those used for each respective user’s ID.me account.
4. One team member from your organization will then submit the End User Tracker to the HSRM Help Desk.
5. The HSRM Help Desk will send that team member the login information for their staff.

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 sort referrals.

Users can sort all lists in HSRM by column heading. The default view lists referrals by highest priority and date added, making it easy to see which referrals need immediate attention. The user may also sort the Referral List.

4.1.1. Column Header Sort

Sorting the Referral List allows users to view the information in any column in ascending or descending order.

To locate a referral by sorting column headers:

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 a second time to sort in descending order. Select it a third time to sort by the default, **Priority Order** and **Date Added**.

3. Select the row of the relevant referral to access the **Referral Details** screen.

**Figure 2: Referral List**

### 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 will select the link referral list sorted by **Priority Order**, ascending **Date Added** secondary sort) then press enter to activate **Advanced Sort** option.

**Figure 3: 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 located on the right of the Referral List. 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.

![Figure 4: Sorting Options]

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 (see 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.
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 (see 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 for care that is not related to a Veteran’s service or 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 6: Referral Details – SEOC Details

4. Review the Procedural Overview for the SEOC.

Figure 7: SEOC Details Screen

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 (see the Locate a Referral selection 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.

![Figure 8: Component Menu – Offline Referral Form](image)

4. The **Offline Referral Form** appears in a new browser tab and users can print, download, and save the form.

![Figure 9: 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 row button for each preferred referral).

   ![Figure 10: Referral List – Multiple Referrals](image)

3. Select the **Component Menu** icon (also called referral list component menu button by screen readers) and select **Offline Referral Form** from the **Print** drop-down menu.
4. The **Offline Referral Form** appears in a new browser tab.

Figure 12: Multiple Offline Referral Form

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

### 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 (see 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 (see 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 13: Referral Details – Add Documents to a Referral](image)


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.*
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 (either **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 (see 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 15: Referral Details – Record Appointment**

![Referral Details](image)

5. Enter the appropriate information (e.g., **Service Requested**, **Appointment for**, **Scheduling Method**, **Date/Time**).

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

**Figure 16: Record Appointment Screen**

![Record Appointment Screen](image)

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, you may search for a community provider using the **Provider Profile Management System (PPMS) Provider Search**, which allows users to search by a provider's National Provider Identifier (NPI).

**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 NPI.

1. On the **Record Appointment** screen, select the **PPMS Provider Search** link.
2. Enter the provider’s NPI in the NPI field.

3. Select the **Find** button to connect directly to **PPMS** to find the provider with the designated NPI.

4. **Select** the appropriate provider.
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.

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

To cancel an appointment:

1. Locate the referral (see 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 is also available from the Referral Details screen in the Patient Banner.

Figure 21: Action Menu – Additional Referral Information

3. Locate the appointment from the Appointments section and select the Status link. The Appointment Change Status screen appears.
Figure 22: Additional Referral Information Screen

| Referral Number | Community Provider | Date       | Time     | Appointment for | Referral Specialty | Assignment Location | Provider Name or Location | Referral Status | Referral Reason |
|-----------------|--------------------|------------|----------|-----------------|--------------------|----------------------|------------------------|----------------|----------------|----------------|
| VA3000000798    | Marine Pathology Grp| 12/33/2019 | 10:30    | Genetic testing, Sex chromatin analysis FISH for genetic testing, Sex chromatin analysis FISH for genetic testing | Medical Geneticist | Marine Pathology Grp, Box 908, St. Pete Ave, Cape Coral, FL 33991-2073 |             | Canceled       |                |
| VA30000001067   | OTH-PSYCHIANS      | 11/13/2019 | 11:00    | Anesthesia consultation related to the procedure proliferative myoma of the uterus | Internal Medicine | OTH-PSYCHIANS, 741 Banyan, Street 501, 33990 |             | Canceled       |                |
| VA30000001067   | UNIVERSITY HEALTH | 11/5/2019  | 12:10    | Age-appropriate immunizations and HPV specific immunizations infective disease | Internal Medicine | UNIVERSITY HEALTH, 55301-5556, 4550 W. 20th St, Fort Myers, FL 33901 |             | Canceled       |                |
| VA30000002106   | ATLANTICARE REG M.D CTR | 10/10/19  | 08:30    | One patient day for the evaluation of the patient's condition | Psychiatric Unit | ATLANTICARE REG M.D CTR, 1-6500 BELLE MEADE PARK, 33016 |             | Canceled       |                |

- **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 Canceled. 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 call 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).
7. Select the **Update** button to save changes.

8. The appointment status now displays as **Canceled**.

**Figure 24: Additional Referral Information Screen**

### 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.

To record contact about a referral:

1. Locate the referral (see 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.

**Figure 25: Action Menu – Record Contact**

![Action Menu – Record Contact](image)

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

**Figure 26: Record Contact – Record Contact Screen**

![Record Contact – Record Contact Screen](image)
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 (see 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 27: 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.
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 (see 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.
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).

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

Figure 34: Task List

8. After editing the task, users can complete the task by selecting the task row to access the Referral Details screen.

Figure 35: Referral Details Screen

9. When users update a task, they are able to 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.

Figure 36: Menu – Task List

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

Figure 37: Task List Screen

4.11. 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 (see 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 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.
4.12. 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: HSRM Report Types

<table>
<thead>
<tr>
<th>Report Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<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 that 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. Allows VA staff, VA supervisors, and Community Providers to review the recent and upcoming Veteran appointments that are scheduled in HSRM. Report fields include the appointment date, appointment status, level of care coordination, and referral details.</td>
</tr>
</tbody>
</table>

To run a report:

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

   ![Menu – Community Provider Referral Summary Report](image)

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

4.13. 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 (see 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.

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.
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 (see the Locate a Referral section of this guide).
2. Select the Clinical Viewer icon on the patient banner of the Referral Details screen, as shown in Figure 42.
3. A menu on the right side of the screen will open. Select the option beginning with **HIE DATA**, as shown in [Figure 43](#).

**Figure 43: Clinical Viewer Access Menu**

4. The Clinical Viewer page will open, displaying patient medical history in HSRM. As shown in [Figure 44](#), the categories of information available for viewing display in a vertical list called the **Chartbook** on the left side of the screen. Select one of the categories in the Chartbook to view it.

**Figure 44: Clinical Viewer Home Screen**

- **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

Table 2: Acronyms and Abbreviations

<table>
<thead>
<tr>
<th>Acronym or Abbreviation</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admin</td>
<td>Administrator</td>
</tr>
<tr>
<td>C6</td>
<td>Community Care Clinical Coordination Contact Center</td>
</tr>
<tr>
<td>CBOC</td>
<td>Community-Based Outpatient Clinic</td>
</tr>
<tr>
<td>CCN</td>
<td>Community Care Network</td>
</tr>
<tr>
<td>EDI</td>
<td>Electronic Data Interchange</td>
</tr>
<tr>
<td>EOC</td>
<td>Episode of Care</td>
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<tr>
<td>HIE</td>
<td>Health Information Exchange</td>
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<tr>
<td>HSRM</td>
<td>HealthShare Referral Manager</td>
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<tr>
<td>IT</td>
<td>Information Technology</td>
</tr>
<tr>
<td>NPI</td>
<td>National Provider Identifier</td>
</tr>
<tr>
<td>OHI</td>
<td>Other Health Insurance</td>
</tr>
<tr>
<td>OS</td>
<td>Operating System</td>
</tr>
<tr>
<td>PDF</td>
<td>Portable Document Format</td>
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<td>PPMS</td>
<td>Provider Profile Management System</td>
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<td>RFS</td>
<td>Request for Services</td>
</tr>
<tr>
<td>SAR</td>
<td>Secondary Authorization Request</td>
</tr>
<tr>
<td>SEOC</td>
<td>Standardized Episode of Care</td>
</tr>
<tr>
<td>TPA</td>
<td>Third-Party Administrator</td>
</tr>
<tr>
<td>TRAIN</td>
<td>Training Finder Real-time Affiliate Integrated Network</td>
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<td>VA</td>
<td>U.S. Department of Veterans Affairs</td>
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<td>VAMC</td>
<td>Veterans Affairs Medical Center</td>
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<tr>
<td>VCA</td>
<td>Veterans Care Agreement</td>
</tr>
<tr>
<td>VHA</td>
<td>Veterans Health Administration</td>
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<td>VISN</td>
<td>Veterans Integrated Service Network</td>
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