Enrollment System Modernization (ESM) Phase 3

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

DG*5.3*1061

Release Notes

October 2021

Department of Veterans Affairs

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1 Introduction

The release of Veterans Health Information System and Technology Architecture (VistA) Registration, Eligibility & Enrollment (REE) Registration (DG) patch DG*5.3*1061 supports the enhancements for the Enterprise Health Benefits Determination (EHBD) program. This patch focuses on updates for the Enrollment System Modernization (ESM) Phase 3 project, which supports Enrollment System Community Care (ESCC) and Enrollment System (ES) Sustainment.

2 Purpose

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

3 Audience

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

4 This Release

This software is being released as a patch (PackMan) message. The PackMan message includes the DG*5.3*1061 patch.

The following sections provide a summary of the enhancements and modifications to the existing software for VistA REE with the release of patch DG*5.3*1061.

4.1 New Features and Functions Added

There are no new features or functions added to VistA REE for DG*5.3*1061.

4.2 Enhancements and Modifications

Patch DG*5.3*1061 updates VistA to support Public Law No. 116-214, Veterans Comprehensive Prevention, Access to Care, and Treatment Act of 2020 or the Veterans COMPACT Act of 2020.

- VistA now identifies enrolled Veterans, non-enrolled Veterans, and former service members that are COMPACT Act eligible by displaying a new system-calculated, view-only COMPACT Act Eligible indicator in VistA Registration options.

- VistA now identifies all non-enrolled patients who are COMPACT Act Eligible with a new secondary eligibility code: COMPACT ACT ELIGIBLE. This eligibility code is calculated by ES.

- The Description of select Veterans Health Administration (VHA) Profiles (VHAPs) are updated to reference COMPACT Act Eligibility.

- VistA shares a new COMPACT Act Indicator with downstream applications via Application Program Interface (API) routine VADPT, as defined in Integration Control Registration (ICR) 10061.

- Four triggers in the MAS ELIGIBILITY CODE field (#8) of the ELIGIBILITY CODE file (#8) contain the non-SAC compliant $N function. Patch DG*5.3*1061 replaces the non-compliant function with SAC compliant code.

Patch DG*5.3*1061 also updates VistA to support Section 5301 of the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 or the Megabus Act, which offers all health care services related to Military Sexual Trauma (MST) to Veterans and former service members with Other Than Honorable (OTH) discharge.

Currently, VistA does not provide a specific eligibility code for non-enrollees seeking MST-related care, resulting in inefficiencies and errors. VistA now identifies MST patients with a new secondary eligibility code: SPECIAL TX AUTHORITY CARE. This eligibility code is calculated by ES.

ES calculates the authoritative eligibilities and sends to sites where the patient is known on ORU/ORF-Z11 Health Level 7 (HL7) messages. ES assigns COMPACT ACT ELIGIBLE and SPECIAL TX AUTHORITY CARE as secondary eligibilities as appropriate and will not assign COMPACT ACT ELIGIBLE or SPECIAL TX AUTHORITY CARE as the primary eligibility.

Table 1 shows the enhancements and modifications included in the DG*5.3*1061 release as tracked in Atlassian Jira.

Table 1: DG*5.3*1061 Enhancements and Modifications

Jira Epic #	Summary
VES-14973	Veterans Comprehensive Prevention, Access to Care, and Treatment Act of 2020 or the Veterans COMPACT (VistA)
VES-15078	Megabus Military sexual trauma (MST) (SEC. 5301) (VistA)

List of Updates

This patch makes the following enhancements to VistA REE:

SECTION 1: REGISTRATION SCREEN UPDATES

1. The Patient Inquiry [DG PATIENT INQUIRY] option displays the new text "COMPACT ACT Status: ELIGIBLE" only if the COMPACT Act Status is Yes.

```
CAPATIENTONE,TEST ONE; ########## ###-##-### MMM, DD, YYYY
========================================================================


  Combat Vet Status: NOT ELIGIBLE                 End Date: 08/31/2025
 COMPACT Act Status: ELIGIBLE
Primary Eligibility: HUMANITARIAN EMERGENCY (VERIFIED)
Other Eligibilities: COMPACT ACT ELIGIBLE, SPECIAL TX AUTHORITY CARE
     Unemployable: NO
     Permanent & Total Disabled: NO


Status      : PATIENT HAS NO INPATIENT OR LODGER ACTIVITY IN THE COMPUTER
Type <Enter> to continue or '^' to exit: ^
```

Figure 1: COMPACT Act Status on Patient Inquiry Option

2. The ELIGIBILITY STATUS DATA, SCREEN <7> screen is updated as follows. VistA Registration options that display the ELIGIBILITY STATUS DATA, SCREEN <7> screen include:

Register a Patient	[DG REGISTER PATIENT]
Load/Edit Patient Data	[DG LOAD PATIENT DATA]
Eligibility Verification	[DG ELIGIBILITY VERIFICATION]
View Registration Data	[DG REGISTRATION VIEW]
Enter A Request/Notification	[FBCH ENTER REQUEST]

   a. A new Group <3.3> displays "COMPACT Act Elig: ELIGIBLE" only when the patient is COMPACT Act Eligible.

```
                   ELIGIBILITY STATUS DATA, SCREEN <7>
DGPATIENT,ONE     MMM DD,CCYY
###-##-####     SC VETERAN
========================================================================
[1]        Patient Type: NSC                        Veteran: YES
          Svc Connected: NO                       SC Percent: 0%
          Rated Incomp.: UNANSWERED
           Claim Number: UNANSWERED
            Folder Loc.: UNANSWERED
[2]   Aid & Attendance: NO                          Housebound: NO
             VA Pension: NO
          VA Disability: NO
     Total Check Amount: NOT APPLICABLE
           GI Insurance: UNANSWERED                     Amount: UNANSWERED
[3]  Primary Elig Code: NSC
     Other Elig Code(s):
      Period of Service: VIETNAM
<3.3> COMPACT Act Elig: ELIGIBLE

[4] Service Connected Conditions as stated by applicant
     --------------------------------------------------
     NONE STATED
<RET> to CONTINUE, 1-4 or ALL to EDIT, ^N for screen N or '^' to QUIT:
```

Figure 2: ELIGIBILITY STATUS DATA, SCREEN <7> Group <3.3>

   b. Users cannot add the new COMPACT ACT ELIGIBLE or SPECIAL TX AUTHORITY CARE Eligibilities in Group [3] at the PRIMARY ELIGIBILITY CODE prompt.

   c. The Help Text ("?", "??") for the PRIMARY ELIGIBILITY CODE prompt does not list COMPACT ACT ELIGIBLE or SPECIAL TX AUTHORITY CARE in the selection list.

   d. The COMPACT ACT ELIGIBLE and SPECIAL TX AUTHORITY CARE eligibility codes are assigned via ES as secondary eligibility codes only. While VistA users are not prohibited from entering the new eligibility codes as secondary eligibilities, ES calculates eligibility and returns the authoritative eligibilities on ORU/ORF-Z11 messages

3. The FEE BASIS (FB) package also displays the ELIGIBILITY STATUS DATA, SCREEN <7> screen in the Enter A Request/Notification [FBCH ENTER REQUEST] option.

SECTION 2: DATA DICTIONARY UPDATES

1. The following two codes are added to the MAS ELIGIBILITY CODE file (#8.1). These entries are provided in the build file and installed with the patch.

```
NUMBER: 24                              NAME: COMPACT ACT ELIGIBLE
  CARD COLOR: BLUE                      ABBREVIATION: CMPT
  VA CODE NUMBER: 12                    TYPE: NON-VETERAN
  PRINT NAME: COMPACT ACT ELIGIBLE     SELECT AS ADDITIONAL: YES

NUMBER: 25                              NAME: SPECIAL TX AUTHORITY CARE
  CARD COLOR: BLUE                      ABBREVIATION: STAC
  VA CODE NUMBER: 12                    TYPE: NON-VETERAN
  PRINT NAME: SPECIAL TX AUTHORITY CARE     SELECT AS ADDITIONAL: YES
```

2. The following two codes are added to the Eligibility Code (#8) file. These entries are added to the file by the post install routine POST^DG531061P.

```
NUMBER: 24                              NAME: COMPACT ACT ELIGIBLE
  CARD COLOR: BLUE                      ABBREVIATION: CMPT
  VA CODE NUMBER: 12                    TYPE: NON-VETERAN
  PRINT NAME: COMPACT ACT ELIGIBLE     SELECT AS ADDITIONAL: YES
  MAS ELIGIBILITY CODE: COMPACT ACT ELIGIBLE
  ID FORMAT: VA STANDARD               AGENCY: VA

NUMBER: 25                              NAME: SPECIAL TX AUTHORITY CARE
  CARD COLOR: BLUE                      ABBREVIATION: STAC
  VA CODE NUMBER: 12                    TYPE: NON-VETERAN
  PRINT NAME: SPECIAL TX AUTHORITY CARE     SELECT AS ADDITIONAL: YES
  MAS ELIGIBILITY CODE: SPECIAL TX AUTHORITY CARE
  ID FORMAT: VA STANDARD               AGENCY: VA
```

3. The file description for the ELIGIBILITY CODE (#8) file is modified to remove the sentence "Currently there are 18 eligibility codes in use by the Dept of Veterans Affairs."

The updated description is shown below:

```
"The ELIGIBILITY CODE file contains all the eligibility codes that can
 be assigned to a patient. All entries in this file must be associated
 with an entry in the MAS ELIGIBILITY CODE file.

 The MAS ELIGIBILITY CODE(#8.1) file consists of those codes which have
 been established by VACO MAS.

 The site is not allowed to add entries to the MAS ELIGIBILITY CODE
 file. However, the site is permitted to add local entries to the
 ELIGIBILITY CODE file.  To add/edit eligibility codes use the option
 'Eligibility Code Enter/Edit [DG ELIG CODE ENTER/EDIT]'. The option
 is on the 'Eligibility/ID Maintenance Menu [DG ELIG MAINTENANCE]'
 menu.

 Normally, adding local codes is not needed. However, the VA/DOD
 Sharing agreement software, being developed by the Dallas ISC, does
 need and use this functionality."
```

4. The file description for the MAS ELIGIBILITY CODE (#8.1) file is modified to remove the sentence "Currently there are 18 eligibility codes in use by the Dept of Veterans Affairs."

The updated description is shown below:

```
"The MAS ELIGIBILITY CODE file consists of those codes which have been
 established by VACO MAS.  Addition to this file of local codes or
 modification of those codes distributed by the MAS package developers
 could have a negative impact on the performance of the MAS module as
 well as other modules.

 If local codes are desired, the site can enter them in the ELIGIBILITY
 CODE file (#8). Each code entered in the ELIGIBILITY CODE file must
 Point to an entry in MAS ELIGIBILITY CODE file via the MAS ELIGIBILITY
 CODE field."
```

5. The following paragraph describing COMPACT Act Eligibility is appended to the LONG DESCRIPTION (#.04) field in the HEALTH BENEFIT PLAN (#25.11) file for the entries listed below:

```
"For Eligible individuals, under Veterans Comprehensive Prevention,
 Access to Care, and Treatment Act of 2020 (COMPACT), Section 201, VA
 will furnish, reimburse, pay for emergent suicide care, make
 referrals, as appropriate, for care following the period of emergent
 suicide care. Eligible individuals are ones who served in the active
 military service, regardless of length of service, and who were
 discharged, excluding anyone who received a dishonorable discharge or
 was discharged or dismissed by reason."
```

```
    HEALTH BENEFIT PLAN (#25.11) file - COMPACT ACT VHAP Description Updates
    Name                                                       Plan Code
    (#.01)                                                     (#.02)
    ---------------------------------------------------------- ------------
    Veteran Full Med Benefits Tx and Rx Copay Exmt                213
    Veteran Full Med Benefits Tx Copay Exmt and Rx Copay Req      214
    Veteran Full Med Benefits Tx Copay Req and Rx Copay Exmt 7    216
    Veteran Full Med Benefits Tx and Rx Copay Req 6              218
    Veteran Full Med Benefits Tx and Rx Copay Req 8              219
    Veteran Full Med Benefits Tx GMT Copay Req and Rx Copay Exmt  220
    Veteran Full Med Benefits Tx GMT Copay Req and Rx Copay Req   221
    Veteran Restricted Med Benefits                              222
    Non Veteran Other Restricted Med Benefits                    223
```

6. A new VHAP is added to the HEALTH BENEFIT PLAN (#25.11) file:

```
NAME : DISHONORABLE VA OR FFP          PLAN CODE: 302
 COVERAGE CODE: DV01001
 SHORT DESCRIPTION:
 DVA
 LONG DESCRIPTION:
 Non-Service Connected Veterans who applied for VA healthcare services,
 but are not eligible to enroll due to a dishonorable discharge or a
 statutory bar pertaining to a period of service which deprives a claimant
 of all VA benefits for any claim based on that period of service. Service
 Connected or Non-Service Connected Veterans who have been identified as
 fugitive felons are no longer eligible to receive health care services,
 including medications and any community care at VA expense. A Fugitive
 Felon is a person fleeing to avoid prosecution, custody or confinement or
 violating a condition of probation or parole imposed for commission of a
 felony under Federal or State Law.

  . Enrollment Status is Not Eligible; Ineligible Date
```

7. The LONG DESCRIPTION (#.04) field in the HEALTH BENEFIT PLAN (#25.11) file for these two entries is revised as defined in subparagraphs below:

```
Name                                                        Plan Code
(#.01)                                                      (#.02)
----------------------------------------------------------- ----------
Veteran Full Med Benefits Tx Copay Req and Rx Copay Exmt 6     215
Veteran Full Med Benefits Tx Copay Req and Rx Copay Exmt 8     217
```

    a. ". MT Status in a Pending Adjudication or MT Copay Required" is replaced with ". MT Status in MT Copay Required."

    b. The paragraph describing COMPACT Act Eligibility is appended.

        For example:

```
NAME : VETERAN FULL MED BENEFITS TX COPAY REQ AND RX COPAY EXMT 8
 PLAN CODE: 217                       COVERAGE CODE: FB01008
 SHORT DESCRIPTION:
 FM TxCo 8
 LONG DESCRIPTION:
 All enrolled Veterans have a comprehensive medical benefits package,
 which VA administers through an annual patient enrollment system.
 They are subject to copayment for their inpatient, outpatient services
 but not subject to copayment for their medications.

Veteran authorized to receive medical benefits with:
     .  Copayment charges for Treatment
     .  No Copayment charges for Medication

 Must be in:
     .  MT Status in MT Copay Required
     .  Priority Group 8a/b/c/d (i.e., SC 0% and NSC)

 For Eligible individuals, under Veterans Comprehensive Prevention, Access
 to Care, and Treatment Act of 2020 (COMPACT), Section 201, VA will
 furnish, reimburse, pay for emergent suicide care, make referrals, as
 appropriate, for care following the period of emergent suicide care.
 Eligible individuals are ones who served in the active military service,
 regardless of length of service, and who were discharged, excluding
 anyone who received a dishonorable discharge or was discharged or
 dismissed by reason.
```

Figure 3: Updated Long Description – MT Status in MT Copay Required

8. The following paragraph describing COMPACT Act Eligibility is appended to the LONG DESCRIPTION (#.04) field in the HEALTH BENEFIT PLAN (#25.11) file for the entries listed below:

"For Eligible individuals, under Veterans Comprehensive Prevention, Access to Care, and Treatment Act of 2020 (COMPACT), Section 201, VA will furnish, reimburse, pay for emergent suicide care, make referrals, as appropriate, for care following the period of emergent suicide care. Eligible individuals are ones who served in the active military service, regardless of length of service, and who were discharged, excluding anyone who received a dishonorable discharge or was discharged or dismissed by reason or while serving in the Armed Forces, was the victim of a physical assault of a sexual nature, a battery of a sexual nature, or sexual harassment."

HEALTH BENEFIT PLAN (#25.11) file - COMPACT ACT VHAP Description Updates

Name (#.01)	Plan Code (#.02)
Restricted Examination Only	224
Applicant in Process	226
Ineligible	290

9. The LONG DESCRIPTION (#.04) field in the HEALTH BENEFIT PLAN (#25.11) file for the plan Veteran Plan CCP Restricted Care, plan code 300 is replaced with the following:

"VHA Profile Veteran Plan CCP Restricted Care is assigned if one of the following eligibilities is met:
Not enrolled Covered Veterans who are otherwise entitled to hospital care, medical services, extended care services and community care services, however they are only eligible for care related to their service connected conditions (less than 50% SC, and 0% non-compensable); was discharged or released from active military service for a disability incurred or aggravated in the line of duty for that disability for the 12-month period following discharge or release; Military Sexual Trauma (MST); or Mental Health Other Than Honorable (OTH); as otherwise documented in their record.

For COMPACT Act 2020, eligible individuals are ones who served in the active military service, regardless of length of service, and who were discharged, excluding anyone who received a dishonorable discharge or was discharged or dismissed by reason; are not enrolled in the health care system established by section 1705 of this title; and served in the Armed Forces for a period of more than 100 cumulative days: and was deployed in a theater of combat operations, or while serving in the Armed Forces, was the victim of a physical assault of a sexual nature, a battery of a sexual nature, or sexual harassment.

```
      Eligible for Class II Dental, but does not meet the criteria for
      enrollment, if, while active duty did not receive dental care within
      90 days of a discharge from active duty and who was discharged or
      released therefrom, excluding anyone who received a dishonorable
      discharge or was discharged or dismissed by reason, and presents to VA
      for their Class II Dental care within 180 days of discharge."
```

NOTE: The VHAP modifications described above are provided in the build with the full data dictionary of the HEALTH BENEFIT PLAN file (#25.11).

SECTION 3: VADPT API & ICR MODIFICATIONS

1. API routine VADPT is modified. A new callable entry point "CAI" is provided for downstream applications to retrieve the COMPACT Act Indicator. The indicator, returned in array VACOM("CAI"), is "1" (COMPACT Act Eligible) if either of the conditions below are true:

    a. The patient is enrolled. A patient is ENROLLED if the current PATIENT ENROLLMENT (#27.11) file record ENROLLMENT STATUS (#.04) field is VERIFIED.

    b. The patient record contains the COMPACT ACT ELIGIBLE eligibility in the PATIENT ELIGIBILITIES (#2.0361) subfile of the PATIENT (#2) file.

2. ICR 10061 is modified to add support for usage of the new "CAI" component.

```
    10061      NAME: VADPT
  CUSTODIAL PACKAGE: REGISTRATION                              Albany
SUBSCRIBING PACKAGE:
            USAGE: Supported        ENTERED: MAR  7,1994
           STATUS: Under Revision   EXPIRES:
         DURATION:                  VERSION:
      DESCRIPTION:                   TYPE: Routine
  VADPT is a utility routine designed to provide a central point where a
  programmer can obtain information concerning a patient's record.
  Supported entry points are provided which will return demographics,
  inpatient status, eligibility information, etc.

  Access to patient information is not limited to using the supported
  entry points in VADPT.  Integration agreements can be established
  through the DBA between REGISTRATION and other packages to reference
  information.

  This integration agreement does not document the input and output
  variables for any of the components of VADPT. That documentation is
  located in the PIMS technical manual, section 12.2 CALLABLE ENTRY
  POINTS IN VADPT.

    ROUTINE: VADPT

  COMPONENT:  CAI
             Will return the Comprehensive Prevention, Access to Care,
             and Treatment (COMPACT) indicator for enrolled Veterans and
             non-enrolled Veterans.
```

```
            Indicator is '1' (for TRUE) if:
              - Enrollment Category from current enrollment record is
                "ENROLLED".
                OR
              - The patient has the "COMPACT ACT ELIGIBLE" eligibility
                code.
         KEYWORDS:

                        ********************
```

4.3 Known Issues

No known or open issues were identified in this release.

4.4 Product Documentation

The following documents apply to this release:

Documentation Title	File Name
DG*5.3*1061 Release Notes	DG_5_3_1061_RN.PDF
User Manual Version 5.3 – Registration Menu	PIMS_REG_UM.PDF
PIMS Version 5.3 Technical Manual	PIMS_TM.PDF

Changes to the Income Verification Match (IVM) Technical Manual are described in Informational Patch IVM*2.0*202.

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