Decision Support Tool (DST) Software Version 1.1.1262 User Guide



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Revision History

NOTE: The revision history cycle begins once changes or enhancements are requested after the document has been baselined.

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		 Updated screen captures to reflect CC Average Wait Time column added to VA Facilities. 	
		 Updated DST Help screen. 	
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		 Updated screen captures. 	
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		 Removed No Later Than Date from Provider workflow. 	
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		 No Later Than Date was renamed to Wait Time Eligibility Date in the VCCPE-Admin workflow. 	
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		Updated screen captures.	
		 Updated acronym list. 	

Date	Revision	Description	Author
		Added character limit note to the Explanation field under the Best Medical Interest of Veteran section.	
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		 Updated Best Medical Interest of Veteran menu options. 	
		 Added Capturing Scheduling Information in the VCCPE-Admin Workflow section. 	
		 Added Auto-Forward Consult to Community Care features 	
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		 Updated name from National Service Desk to Enterprise Service Desk. 	
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05/21/2019	2.0	GMRC*3*129:	AbleVets
		 Updated VA Facility search radius to 100 miles. 	
		Updated DST dashboard screens.	
04/10/2019	1.0	Initial Documentation Release for DST v1.0.03.	AbleVets

Artifact Rationale

Per the Veteran-focused Integrated Process (VIP) Guide, the User's Guide is required to be completed prior to Critical Decision Point #2 (CD2), with the expectation that it will be updated as needed. A User Guide is a technical communication document intended to give assistance to people using a particular system, such as VistA end users. It is usually written by a technical writer, although it can also be written by programmers, product or project managers, or other technical staff. Most user guides contain both a written guide and the associated images. In the

case of computer applications, it is usual to include screenshots of the human-machine interfaces, and hardware manuals often include clear, simplified diagrams. The language used is matched to the intended audience, with jargon kept to a minimum or explained thoroughly. The User Guide is a mandatory, build-level document, and should be updated to reflect the contents of the most recently deployed build. The sections documented herein are required if applicable to your product.

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1. Introduction

The Veterans Health Administration (VHA) Office of Community Care has a need for a real-time decision support tool to help Department of Veterans Affairs (VA) Providers and Veterans quickly review the criteria proscribed in the VA MISSION Act of 2018, determine whether a given Veteran is eligible and would be best served utilizing the Veterans Community Care Program, and document the decision rationale in the Veteran's health record.

The Decision Support Tool (DST) software will:

- Allow the user to view relevant data within the existing Computerized Patient Record System (CPRS) consult order workflow, that helps the Veteran and VA provider decide if a consult service should be referred to the local VA facility, a near-by VA facility via Inter-Facility Consults (IFC), or to a community provider by providing information about the following:
 - o Drive time standards associated with the requested consult service.
 - Average wait times for the requested clinical service at VA facilities near the Veteran's place of residence. Note, the average wait times may not be used to determine wait time eligibility.
 - Veteran's eligibility for accessing care in the community and their stated preferences (opt-in/out)
- Allow the provider to select the consult decision and enter additional justification text when indicated.
- Based on the decision outcome, provide required information to the Electronic Medical Record (EMR) in order to initiate either an in-house, IFC, or Veteran Community Care Program (VCCP) consult order.
- Document the rationale for the referral decision in the consult record.
- Generate structured text based on the displayed results that can be used for downstream report generation.

1.1. Purpose

The purpose of this document is to provide instruction for utilizing the DST to standardize and streamline consult management for Community Care.

1.2. Document Orientation

The *Decision Support Tool User Guide* will provide explanations of each screen and of all user interface options within the context of an easy to understand demonstration data scenario.

This document is also designed to provide the user with screen-by-screen "how to" information on the usage of Consult Toolbox.

1.2.1. Organization of the Manual

Section 1: Introduction

The Introduction section provides the purpose of this manual, an overview of the DST software, an overview of the software used, project references, contact information for the user to seek additional information, and an acronyms and abbreviations list for this manual.

Section 2: System Summary

The System Summary section provides a graphical representation of the equipment, communication, and networks used by the system, user access levels, how the software will be accessed, and contingencies and alternative modes of operation.

Section 3: Getting Started

Information for the Getting Started section provides a general walk-through of the system from initiation through exit, enabling the user to understand the sequence and flow of the system.

Section 4: Using the Software

This section gives the user the "how to" information to use DST, including many step-by-step procedures.

Section 5: Troubleshooting

This section provides troubleshooting for the DST user.

Section 6: Acronyms and Abbreviations

This section provides a list of acronyms and abbreviations found in this document.

1.2.2. Assumptions

This guide was written with the following assumed experience/skills of the audience:

- User has login credentials for CPRS.
- User has basic knowledge of the CPRS operating system (such as the use of commands, menu options, and navigation tools).
- User has Consult Toolbox v1.9.0054 or later installed on their machine.
- User has Google Chrome installed on their machine.

1.2.3. Coordination

N/A

1.2.4. Disclaimers

1.2.4.1. Software Disclaimer

This software was developed at the Department of Veterans Affairs (VA) by employees of the Federal Government in the course of their official duties. Pursuant to title 17 Section 105 of the United States Code this software is not subject to copyright protection and is in the public domain. VA assumes no responsibility whatsoever for its use by other parties, and makes no guarantees, expressed or implied, about its quality, reliability, or any other characteristic. We

would appreciate acknowledgement if the software is used. This software can be redistributed and/or modified freely provided that any derivative works bear some notice that they are derived from it, and any modified versions bear some notice that they have been modified.

1.2.4.2. Documentation Disclaimer

The appearance of external hyperlink references in this manual does not constitute endorsement by the Department of Veterans Affairs (VA) of this Web site or the information, products, or services contained therein. The VA does not exercise any editorial control over the information you may find at these locations. Such links are provided and are consistent with the stated purpose of the VA.

1.2.5. Documentation Conventions

This manual uses several methods to highlight different aspects of the material.

Table 1. Documentation Symbols and Descriptions

Symbol	Description	
A	CAUTION: Used to caution the reader to take special notice of critical information.	

NOTE: Notes are used to inform the reader of general information including references to additional reading material.

1.2.6. References and Resources

Readers who wish to learn more about DST, Consult Toolbox, and CPRS should consult the following:

- CPRS: Consult/Request Tracking in the VDL: https://www.va.gov/vdl/application.asp?appid=62
- Office of Community Care Field Guidebook: REDACTED
- Office of Community Care Field Guidebook- Tools-HSRM section

1.3. Enterprise Service Desk and Organizational Contacts

For issues related to the Community Care DST that cannot be resolved by this manual or the site administrator, please contact the Enterprise Service Desk at 855-NSD-HELP (673-4357).

2. System Summary

2.1. System Configuration

Within the current CPRS order consult workflow, VA providers utilize the DST system to support the decision and election for consult services for a given consult.

Consult Order in CTB/CPRS

No

Review eligibility and consult order information required?

No

Review eligibility and consult services information in DST

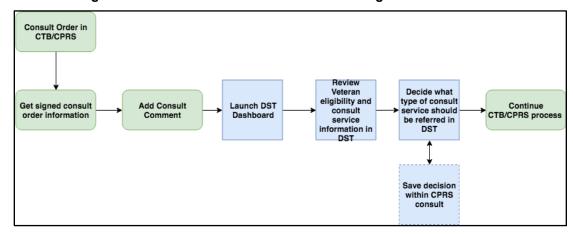
Save decision within DST

Save decision within DST

Add DST Consult Comment

Figure 1: DST Business Process Workflow - Unsigned Order Consult

Figure 2: DST Business Process Workflow - Signed Order Consult



2.2. Data Flows

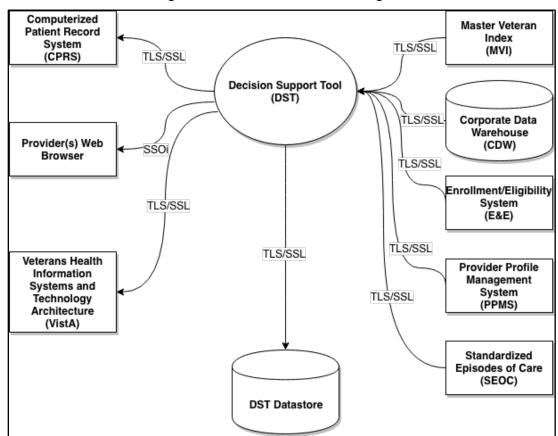


Figure 3: CCAD DST Data Flow Diagram

2.3. User Access Levels

All VA providers will serve as the main user base for this system. The user must have access to CPRS and Consult Toolbox must be enabled to access DST.

2.4. Continuity of Operation

DST falls under the Veterans Health Information Systems and Technology Architecture (VistA) Continuity of Operations Plan.

3. Getting Started

This section provides a general walkthrough of DST from initiation through exit.

3.1. Logging On

DST is accessed through CPRS.

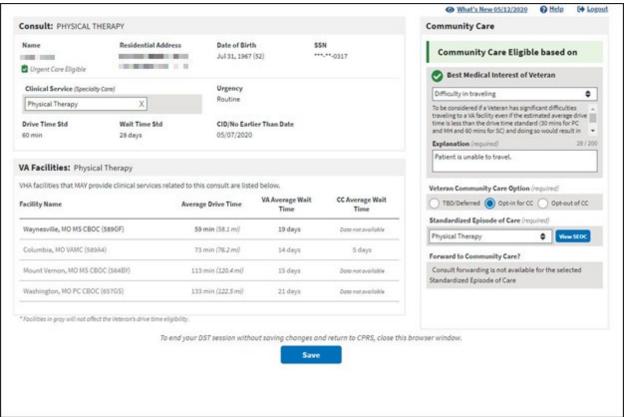
NOTE: If you have Consult Toolbox v1.9.0054 installed, you will no longer see the standard VA-provided Single Sign-On Integration (SSOi) page when launching DST from CPRS.

3.2. System Menu

The DST Dashboard features three sections: Consult, VA Facilities, and Community Care. The fields

3.2.1. Provider DST Dashboard Screen Example

Figure 4: Provider DST Dashboard Screen Example



Following are descriptions of the features on the DST Dashboard.

Consult section:

- Name Veteran name. This is a read only field supplied by CPRS.
- Residential Address Veterans residential address. This is a read only field supplied by the Master Veteran Index (MVI) data interface. Provided by Eligibility & Enrollment System. If any part of the address is not available, then it is displayed as "No address available".
- **Date of Birth** Veterans date of birth. This is a read only field supplied by CPRS.
- SSN Veterans Social Security Number (SSN). This is a read only field supplied by CPRS.
- Clinical Service Consult Clinical Service. Automatically assigned when the user launches DST from CPRS or this field can be manually entered, it depends if you are using an unsigned or signed consult. When you are selecting the Clinical Service, you can start typing the value you are looking for. Common synonyms are searchable and will

appear in the drop-down menu along with the official service name. When you select a Clinical Service synonym from the drop-down list, the official clinical service name will be displayed. Only official Clinical Service names will be saved with the DST information and written to the consult when signed.

- **Urgency** This is a read only field supplied by CPRS.
 - o **Routine** A Routine consult indicates the patient should be seen in accordance with the clinically indicated date.
 - Stat Stat consults will be defined as an "immediate" need. The sender of a stat consult is required to:
 - Contact the intended receiver of the consult request to discuss the patients' situation.
 - A stat consult must be completed within 24 hours.
- **Drive Time Std** This is a read only field supplied by local DST datastore, based on whether the selected clinical service is considered Primary Care/Mental Health or Specialty Care.
- Wait Time Std This is a read only field supplied by local DST datastore, based on whether the selected clinical service is considered Primary Care/Mental Health or Specialty Care.
- CID/No Earlier Than Date This is a read only field auto-populated from CPRS.

VA Facilities section: VHA facilities that MAY provide clinical related to this consult are listed in this section. DST searches an internal table (updated weekly from Corporate Data Warehouse (CDW)) to filter the returned list to facilities within a 100-mile radius for Specialty Care consults (40-mile radius for Primary Care/Mental Health) that offer services associated with consult Clinical Service (based on the National IFC Dashboard).

NOTE: Average Drive Time and Average Wait Time will not show up until a Clinical Service has been selected, whether by default or via manual entry. The DST application attempts to map consult names to Clinical Services for all Nationwide sites. However, due to the distributed and dynamic nature of consult name addition by the local VA site, DST is not able to keep a real time list of these Consult to Clinical Service mappings. When DST application cannot find a Consult to Clinical Service mapping, the application requires that the user enter the Clinical Service manually on the DST dashboard. When this clinical service is entered, the DST application will continue to request and populate the facility drive time and average wait time based on Residential Address and the entered clinical service.

NOTE: DST may display facilities that are outside the drive time standard so that the Veteran is aware of VA facility options. Facilities displayed that are outside the drive time standard, are not used in the drive time eligibility calculation and will appear in gray text.

- Facility Name List of VHA facilities that offer a related consult service within a 100-mile radius for Specialty Care and a 40-mile radius for Primary Care of the Veteran residential address (sorted by Average Drive Time low-to-high).
- Average Drive Time This refers to the average time it takes to drive from the Veteran's residential address as noted in the Enrollment System to each identified VA facility that may offer the requested service. This measurement uses VA's Provider

Profile Management System (PPMS) which is a Microsoft-based product that utilizes Bing maps and a proprietary algorithm to determine the time to drive between the two addresses. If PPMS returns 10 facilities or fewer, the drive time calculation takes into account distance, route, speed limits and historical traffic pattern data. If PPMS returns more than 10 facilities, historical traffic data will be excluded from the drive time calculation.

• VA Average Wait Time – This is measured as the average time from the date an appointment is created to the date of the appointment itself. DST displays the average wait times of all new patient appointments completed in the stop code of the requested clinical service, based on new patient appointments in a rolling 30-day assessment. It is possible a facility offers the service requested but has not had any new patients in the last 30 days. In this case, the Average Wait Time field will state Data Not Available. This calculation is similar to the method used for the VA Access to Care public facing website.

It is important to note that average wait time in DST should be used only for reference. It will not be used to establish Community Care eligibility. Wait time eligibility is determined at the time of scheduling the appointment, not at the time of requesting it.

• CC Average Wait Time – The Facilities list in DST shows the average wait time for Community Care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service.

Community care wait time is calculated by determining the average time from the date a community care appointment is made to the date of the appointment itself, as recorded in Health Share Referral Manager (HSRM). DST displays the average wait times of all appointments booked or completed under Standard Episodes of Care (SEOCs) related to the requested clinical service, based on a rolling 90-day assessment. The Community Care data displayed is for community care appointments associated with the facility and SEOCs associated with the selected clinical service. This information is provided to inform providers, schedulers and Veterans of the comparable wait time in the community so they can make an informed decision when considering community care.

Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

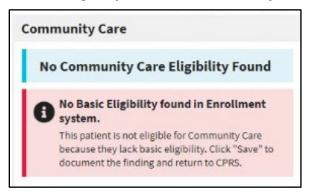
Important - community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Community Care section: If DST receives a unique Veteran Integration Control Number (ICN) back from MVI, it sends the ICN to the Enrollment System (ES) Application Program Interface (API) to retrieve the Veteran's residential address and a Veterans eligibility identifying string containing one or more of the following eligibility codes applicable to DST: "U" – Urgent care eligible, "G" – Grandfathered, "H" – Hardship, or "N" – No full-service VHA facility.

- Community Care Eligible based on
 - o **Enrollment System Basic Eligibility Factor** If a Veteran is designated in the Enrollment System as ineligible for Community Care, DST will now display a message indicating that the Veteran is ineligible for Community Care because they lack Basic eligibility. If the Veteran lacks Basic eligibility, you will not be

able to edit any information on the DST dashboard and you will not be able to establish Community Care eligibility for this Veteran. When you have reviewed the Veteran information in DST, save the DST record to document the Community Care ineligible status for the Veteran. This affects patients eligible for VA care but not otherwise eligible for Community Care, such as Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) patients being seen at the VAMC under the CHAMPVA In-house Treatment Initiative (CITI) program.

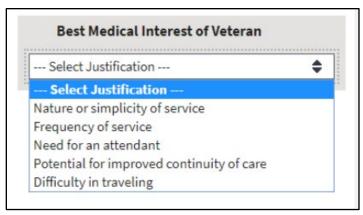
Figure 5: No Basic Eligibility Found in Enrollment System Message



- Enrollment System Eligibility Factors Hardship, Grandfathered, or No Full Service VHA. If any of the indicators are received from the enrollment system, the Veteran will be identified as eligible for Community Care.
- Drive Time If there are no facilities listed within the drive time standard for the selected clinical service, then the Veteran will be identified as eligible for Community Care based on drive time.
- O Best Medical Interest of Veteran Drop-down menu. There is a Community Care policy and procedure that allows a VA provider to request the ability for a Veteran to receive care in the community based on that Veterans best medical interest. Congress requests that VA providers consider: Nature or simplicity of service, Frequency of service, Need for an attendant, Potential for improved continuity of care, or Difficulty in traveling.

NOTE: The Best Medical Interest of Veteran drop-down menu will only display when DST is launched from an unsigned consult if the Veteran is not otherwise eligible.

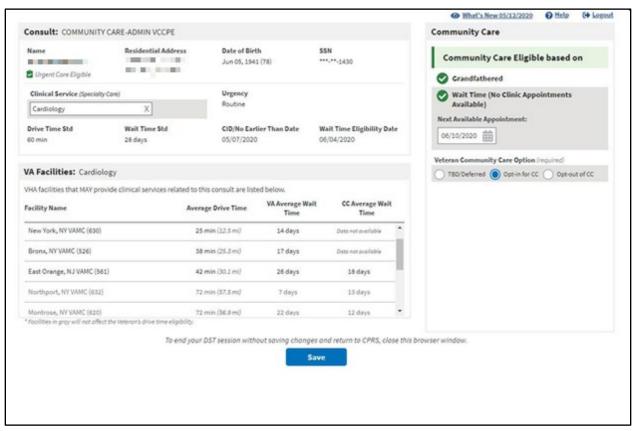
Figure 6: Best Medical Interest of Veteran Menu Options



- Nature or simplicity of service
- Frequency of service
- Need for an attendant
- Potential for improved continuity of care
- Difficulty in traveling
- Explanation (required) field This field displays once a selection has been made from the **Best Medical Interest of Veteran** drop-down menu. This information will be saved to the consult and is captured for reporting purposes. (This field has a maximum 200-character limit.)
- Veteran Community Care Option (required)
 - O TBD/Deferred When this radio button is selected it will require a Standardized Episodes of Care (SEOC) to be selected if the Veteran ultimately opts in to Community Care. Because a SEOC is required on every consult that goes to Community Care, this allows the ordering provider to select the appropriate SEOC to match the consult/order that is being ordered at the time it is placed. Additionally, it allows the creator of the consult and thus user of the DST to use information even if the Veteran is a) Not ready to decide or b) Not present. This button then enables the provider to ask a team member to finish the opt in/out decision later while maintaining the integrity of the initial DST dashboard information.
 - o **Opt-In for CC** Veteran elects care in the community.
 - Opt-out of CC Veteran elects to remain within the VA for care.
- Standardized Episode of Care (required) Relates to Clinical Service. A service or group of services the VA authorizes a community provider to perform to complete the consult order including the duration and number of visits that might be necessary. Some or all of the authorized services may need to be performed during any particular episode of care.
- Forward Consult to Community Care? Option to automatically forward consult to Community Care when order is signed.
 - o Yes
 - o No

3.2.2. Admin VCCPE DST Dashboard Screen Example

Figure 7: Admin VCCPE DST Dashboard Screen Example



Following are descriptions of the features on the DST Dashboard.

Consult section:

- Name Veteran name. This is a read only field supplied by CPRS.
- **Residential Address** Veterans residential address. This is a read only field supplied by the MVI data interface. Provided by Eligibility & Enrollment System. If any part of the address is not available, then it is displayed as "No address available".
- **Date of Birth** Veterans date of birth. This is a read only field supplied by CPRS.
- SSN Veterans Social Security Number (SSN). This is a read only field supplied by CPRS.
- Clinical Service Consult Clinical Service. Automatically assigned when the user launches DST from CPRS or this field can be manually entered, it depends if you are using an unsigned or signed consult. When you are selecting the Clinical Service, you can start typing the value you are looking for. Common synonyms are searchable and will appear in the drop-down menu along with the official service name. When you select a Clinical Service synonym from the drop-down list, the official clinical service name will be displayed. Only official Clinical Service names will be saved with the DST information and written to the consult when signed.
- Urgency This is a read only field supplied by CPRS.

- Routine A Routine consult indicates the patient should be seen in accordance with the clinically indicated date.
- Stat Stat consults will be defined as an "immediate" need. The sender of a stat consult is required to:
 - Contact the intended receiver of the consult request to discuss the patients' situation.
 - A stat consult must be completed within 24 hours.
- **Drive Time Std** This is a read only field supplied by local DST datastore, based on whether the selected clinical service is considered Primary Care/Mental Health or Specialty Care.
- Wait Time Std This is a read only field supplied by local DST datastore, based on the urgency and whether the selected clinical service is considered Primary Care/Mental Health or Specialty Care.

Urgency	Туре	Wait Time Standard
Routine	Primary Care/Mental Health	28 days
Routine	Specialty Care	20 days
Stat	Primary Care/Mental Health or Specialty Care	1 day

- **CID/No Earlier Than Date** This is a read only field auto-populated from CPRS.
- Wait Time Eligibility Date This date is calculated as Today + wait time standard. See additional wait time eligibility details in the *Office of Community Care Field Guidebook*.

VA Facilities section: VHA facilities that MAY provide clinical related to this consult are listed in this section. DST searches an internal table (updated weekly from Corporate Data Warehouse (CDW)) to filter the returned list to facilities within a 100-mile radius for Specialty Care consults (40-mile radius for Primary Care/Mental Health) that offer services associated with consult Clinical Service (based on the National IFC Dashboard).

NOTE: Average Drive Time and Average Wait Time will not show up until a Clinical Service has been selected, whether by default or via manual entry. The DST application attempts to map consult names to Clinical Services for all Nationwide sites. However, due to the distributed and dynamic nature of consult name addition by the local VA site, DST is not able to keep a real time list of these Consult to Clinical Service mappings. When DST application cannot find a Consult to Clinical Service mapping, the application requires that the user enter the Clinical Service manually on the DST dashboard. When this clinical service is entered, the DST application will continue to request and populate the facility drive time and average wait time based on Residential Address and the entered clinical service.

NOTE: DST may display facilities that are outside the drive time standard so that the Veteran is aware of VA facility options. Facilities displayed that are outside the drive time standard, are not used in the drive time eligibility calculation and will appear in gray text.

• Facility Name – List of VHA facilities that offer a related consult service within a 100-mile radius for Specialty Care and a 40-mile radius for Primary Care of the Veteran residential address (sorted by Average Drive Time low-to-high).

- Average Drive Time This refers to the average time it takes to drive from the Veteran's residential address as noted in the Enrollment System to each identified VA facility that may offer the requested service. This measurement uses VA's Provider Profile Management System (PPMS) which is a Microsoft-based product that utilizes Bing maps and a proprietary algorithm to determine the time to drive between the two addresses. If PPMS returns 10 facilities or fewer, the drive time calculation takes into account distance, route, speed limits and historical traffic pattern data. If PPMS returns more than 10 facilities, historical traffic data will be excluded from the drive time calculation.
- VA Average Wait Time This is measured as the average time from the date an appointment is created to the date of the appointment itself. DST displays the average wait times of all new patient appointments completed in the stop code of the requested clinical service, based on new patient appointments in a rolling 30-day assessment. It is possible a facility offers the service requested but has not had any new patients in the last 30 days. In this case, the Average Wait Time field will state Data Not Available. This calculation is similar to the method used for the VA Access to Care public facing website.

It is important to note that average wait time in DST should be used only for reference. It will not be used to establish Community Care eligibility. Wait time eligibility is determined at the time of scheduling the appointment, not at the time of requesting it.

• CC Average Wait Time – The Facilities list in DST shows the average wait time for community care appointments so that Veterans and providers can compare the average wait times between VHA and the community for the selected clinical service.

Community care wait time is calculated by determining the average time from the date a community care appointment is made to the date of the appointment itself, as recorded in Health Share Referral Manager (HSRM). DST displays the average wait times of all appointments booked or completed under Standard Episodes of Care (SEOCs) related to the requested clinical service, based on a rolling 90-day assessment. The Community Care data displayed is for community care appointments associated with the facility and SEOCs associated with the selected clinical service. This information is provided to inform providers, schedulers and Veterans of the comparable wait time in the community so they can make an informed decision when considering community care.

Adding the community care wait time to DST will assist with guiding the conversation between the VA Care Team and the Veteran, regarding their VA and community care options to include average community care wait time.

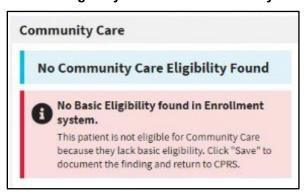
Important - community care eligibility based on wait time is still to be determined at the time of scheduling into the specific VA clinic where the Veteran is to be seen.

Community Care section: If DST receives a unique Veteran ICN back from MVI, it sends the ICN to the Enrollment System (ES) API to retrieve the Veteran's residential address and a Veterans eligibility identifying string containing one or more of the following eligibility codes applicable to DST: "U" – Urgent care eligible, "G" – Grandfathered, "H" – Hardship, or "N" – No full-service VHA facility.

• Community Care Eligible based on –

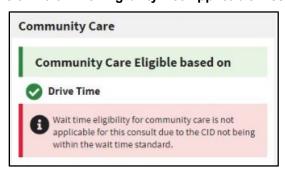
Enrollment System Basic Eligibility Factor - If a Veteran is designated in the Enrollment System as ineligible for Community Care, DST will now display a message indicating that the Veteran is ineligible for Community Care because they lack Basic eligibility. If the Veteran lacks Basic eligibility, you will not be able to edit any information on the DST dashboard and you will not be able to establish Community Care eligibility for this Veteran. When you have reviewed the Veteran information in DST, save the DST record to document the Community Care ineligible status for the Veteran. This affects patients eligible for VA care but not otherwise eligible for Community Care, such as Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) patients being seen at the VAMC under the CHAMPVA In-house Treatment Initiative (CITI) program.

Figure 8: No Basic Eligibility Found in Enrollment System Message



Wait Time Eligibility Not Applicable – If the CID is further in the future than
the Wait Time Eligibility Date, then Wait Time Eligibility is not applicable for the
consult and the following warning will display.

Figure 9: Wait Time Eligibility Not Applicable Message



- Enrollment System Eligibility Factors Hardship, Grandfathered, No Full
 Service VHA. If any of the indicators are received from the enrollment system,
 the Veteran will be identified as eligible for Community Care.
- Drive Time If there are no facilities listed within the drive time standard for the selected clinical service, then the Veteran will be identified as eligible for Community Care based on drive time.
- Wait Time (No Clinic Appointments Available) If the date entered in the Next Available Appointment field is greater than the Wait Time Eligibility Date,

then the Veteran will be identified as eligible for Community Care based on wait time.

• Veteran Community Care Option (required) –

- O TBD/Deferred When this radio button is selected it will require a Standardized Episodes of Care (SEOC) to be selected if the Veteran ultimately opts-in to Community Care. Because a SEOC is required on every consult that goes to Community Care, this allows the ordering provider to select the appropriate SEOC to match the consult/order that is being ordered at the time it is placed. Additionally, it allows the creator of the consult and thus user of the DST to use information even if the Veteran is a) Not ready to decide or b) Not present. This button then enables the provider to ask a team member to finish the opt in/out decision later while maintaining the integrity of the initial DST dashboard information.
- Opt-In for CC Veteran elects care in the community.
- Opt-out of CC Veteran elects to remain within the VA for care.

3.2.3. DST Dashboard Controls

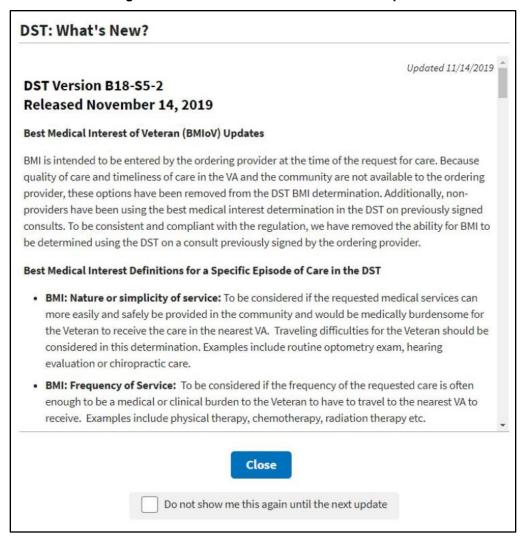
The DST Dashboard Controls are located at the top right of the DST Dashboard screen.

Figure 10: DST Dashboard Controls



• What's New? - Click What's New? to open the DST: What's New? window. This window lists the new features for each release/build.

Figure 11: DST: What's New? Window Example



• Help – Click Help to open a window offering resources for answering questions.

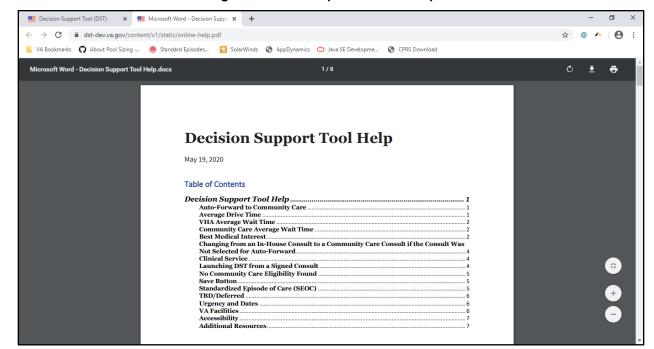


Figure 12: DST Help Window Example

• Logout – Click Logout to exit out of DST.

3.3. Exit System

To exit DST, click **Logout** at the upper right corner of your screen. To end your DST session without saving changes and return to CPRS, close the browser window.

4. Using the Software

4.1. Launching DST

DST can be accessed the following ways:

- Accessing the Decision Support Tool via an Unsigned Consult
- Accessing the Decision Support Tool when Ordering a New Consult
- Accessing the Decision Support Tool via Adding a Comment in a Signed Consult

NOTE: When launched, DST will determine if the consult should be opened in the Provider workflow or the Veteran Community Care Program Eligibility (VCCPE)-Admin workflow.

The sections below provide additional information regarding how to launch DST.

NOTE: All examples in this document are representative of test data, no patient Personally Identifiable Information (PII) was used.

4.1.1. Launching DST from an Unsigned Consult or When Ordering a New Consult

DST can be launched from the **Order a Consult** dialog box from an unsigned consult and when ordering a new consult. When the CPRS window titled **Order a Consult** is active and populated as an outpatient consult without a DST ID already in the Reason for Request, Consult Toolbox displays a message over the **Accept Consult** button while it sends the Consult to Service/Specialty name to DST to determine if the consult is applicable to the MISSION Act.

DST searches an internal table (updated nightly from CDW) to determine whether the Clinical Service associated with the consult requires DST and returns the result to Consult Toolbox.

If DST returns FALSE, no action is initiated by Consult Toolbox and the consult order workflow continues uninterrupted. If DST returns TRUE or a previous DST ID is found in the Reason for Request field, Consult Toolbox displays a movable, non-modal window to inform the user that the consult should be reviewed for eligibility under the MISSION Act and allows them to open the DST prior to accepting the consult.

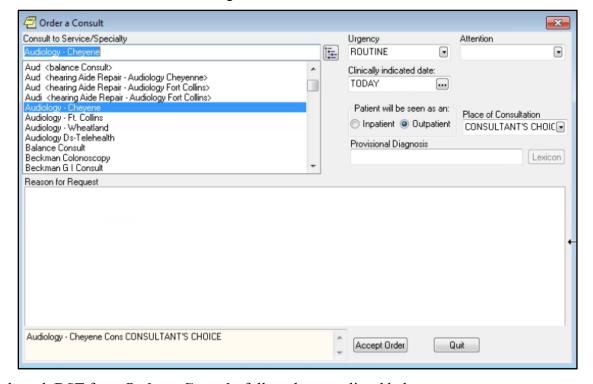


Figure 13: Order a Consult

To launch DST from **Order a Consult**, follow the steps listed below:

1. From the **Order a Consult** window, select an option from the **Consult to Service/Specialty**. If **Outpatient** is selected, then a message stating that it is checking to see if the consult requires MISSION Act support displays.

Figure 14: MISSION Act Support Message



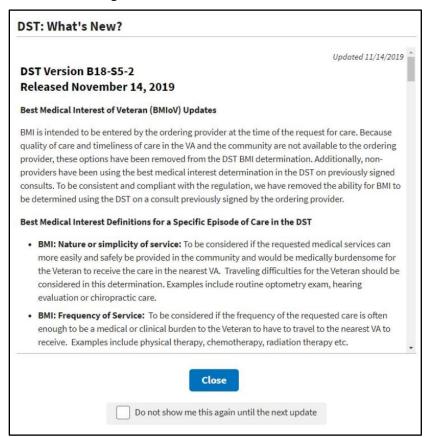
If MISSION Act requires the use of the DST, a message will display.

Figure 15: MISSION Act Requires DST Message



2. Click Launch DST. The DST: What's New? Screen displays.

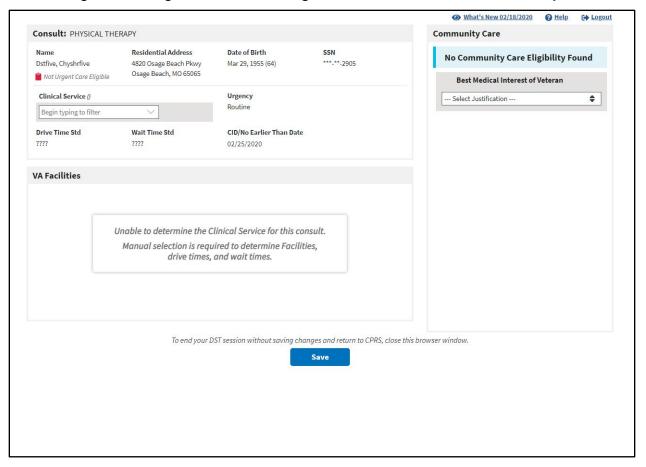
Figure 16: DST: What's New? Screen



NOTE: If you do not want the DST: What's New? window to display each time you launch DST, select the **Do not show me this again until the next update** checkbox and the window will only display where there are new DST updates.

3. Click Close. The **DST Dashboard** displays.

Figure 17: Unsigned Consult/Ordering a New Consult: DST Dashboard Example



4.1.2. Launching DST from Add Comments to Consult

DST can be accessed from the Consult Toolbox menu that is displayed when you right-click inside the Add Comment to Consult window in CPRS. When DST is launched this way, the user input data is carried-forward from the most recent DST data set if present.

DST Data is kept in the local database for a period of 30 days after the last update. The data is used to populate the consult comment when the order is signed and to restore the user entries when DST is reopened. If someone opens DST from a consult after the DST data has been deleted, they will see the same as if DST was being opened for the first time on the consult. Eligibility and facility information is always updated in real-time, while the Best Medical Interest of the Veteran, Veteran Community Care Option, SEOC, and Consult Decision will be blank.

To launch DST from Consult Toolbox Add Comment to Consult, follow the steps listed below:

 From the Action menu, select Consult Tracking... > Add Comment. The Add Comment to Consult window displays the Consult Toolbox menu.

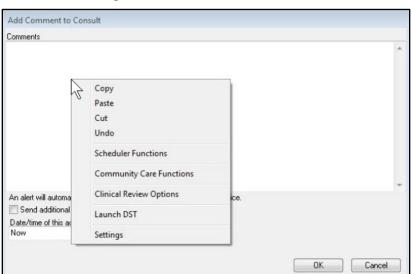


Figure 18: Consult Toolbox Menu

2. From the Consult Toolbox menu, select Launch DST. The DST: What's New? Screen displays.

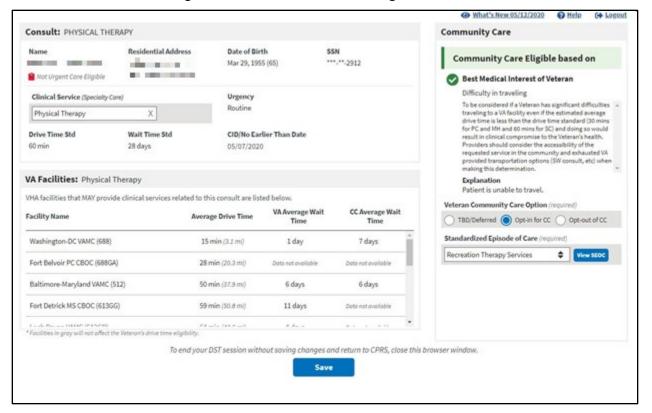
DST: What's New? Updated 11/14/2019 DST Version B18-S5-2 Released November 14, 2019 Best Medical Interest of Veteran (BMIoV) Updates BMI is intended to be entered by the ordering provider at the time of the request for care. Because quality of care and timeliness of care in the VA and the community are not available to the ordering provider, these options have been removed from the DST BMI determination. Additionally, nonproviders have been using the best medical interest determination in the DST on previously signed consults. To be consistent and compliant with the regulation, we have removed the ability for BMI to be determined using the DST on a consult previously signed by the ordering provider. Best Medical Interest Definitions for a Specific Episode of Care in the DST . BMI: Nature or simplicity of service: To be considered if the requested medical services can more easily and safely be provided in the community and would be medically burdensome for the Veteran to receive the care in the nearest VA. Traveling difficulties for the Veteran should be considered in this determination. Examples include routine optometry exam, hearing evaluation or chiropractic care. • BMI: Frequency of Service: To be considered if the frequency of the requested care is often enough to be a medical or clinical burden to the Veteran to have to travel to the nearest VA to receive. Examples include physical therapy, chemotherapy, radiation therapy etc. Close Do not show me this again until the next update

Figure 19: DST: What's New? Screen

NOTE: If you do not want the DST: What's New? window to display each time you launch DST, select the **Do not show me this again until the next update** checkbox and the window will only display where there are new DST updates.

3. Click Close. The **DST Dashboard** displays.

Figure 20: DST Dashboard for a Signed Consult



4.2. Capturing Information in DST

4.2.1. Capturing Provider and Veteran Decision Data

DST allows you to enter additional information required to fully document the decision to order a VA consult or create a Community Care referral. To enter additional information, follow the steps listed below:

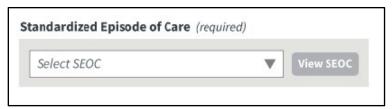
- 1. Under the **Consult** section, verify if the **Clinical Services** (**Specialty Care**) field has been auto populated. If the consult is mapped to a clinical service, this field will be populated with the mapped value. If this field is not populated, enter/select the appropriate clinical service. The **VA Facilities** section will populate.
- 2. If there are no other Community Care eligibility factors found and the provider and Veteran have agreed that it is in the Veteran's best medical interest to be seen in the community during this specific episode of care, under the **Community Care** section, select an option from the **Best Medical Interest of Veteran** drop-down menu to establish eligibility. Once an option is selected, you must provide additional clinical information to support Best Medical Interest (BMI) selection in the **Explanation** field.

22

NOTE: The **Best Medical Interest of Veteran** option will be read-only when the consult has been signed if the value was previously entered otherwise it is not displayed.

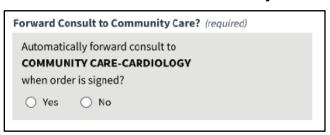
3. If the Veteran is eligible for Community Care, from the Veteran Community Care Choice area, select the Veteran's choice to TBD/Deferred, Opt-in for CC, or Opt-out of CC. If you select the Veteran Community Care Choice of TBD/Deferred or Opt-in for CC, the Standardized Episode of Care section becomes visible.

Figure 21: Standardized Episode of Care Section



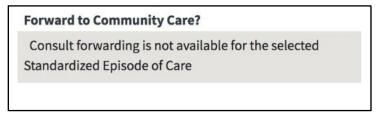
4. If the Veteran is eligible for Community Care and opts-in, from the **Standardized Episode of Care** drop-down menu, select a SEOC to define the authorized care should the consult be forwarded to Community Care. The list of SEOCs is filtered based on the selected Clinical Service (based on government-furnished mapping) to eliminate unrelated SEOCs from the selection list. The SEOC content can be previewed after selection. Once you select the SEOC, the **Forward Consult to Community Care** section becomes visible.

Figure 22: Auto-Forward Consult to Community Care Section



Note, if the selected SEOC is not available for consult forwarding a message will display. Please refer to the DST-Clinical Service Mapping file on the SharePoint site.

Figure 23: Auto-Forward Consult to Community Care Not Available Message



NOTE: DST generates a standard Community Care Consult Name based on the SEOC selected.

5. From the **Forward Consult to Community Care** section, select **Yes** or **No** if you want to automatically forward the consult when the order is signed. If you try to save the DST info before selecting an option, an error message displays prompting you to make the correction before saving.

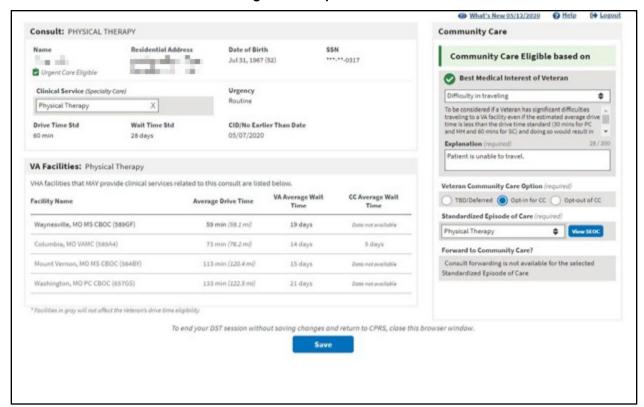
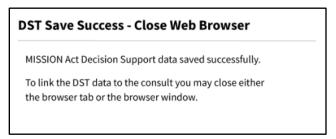


Figure 24: Populated DST

6. Once the required DST information is populated the save button will enabled. Click **Save DST Info**, the **DST Save Success Message** displays. The information captured on the DST dashboard will now be saved to the consult.

Figure 25: DST Save Success Message



If DST is unable to save due to content missing, the **Unable to Save Message** displays. Update the missing fields and save again.

Figure 26: Missing Required Fields Message



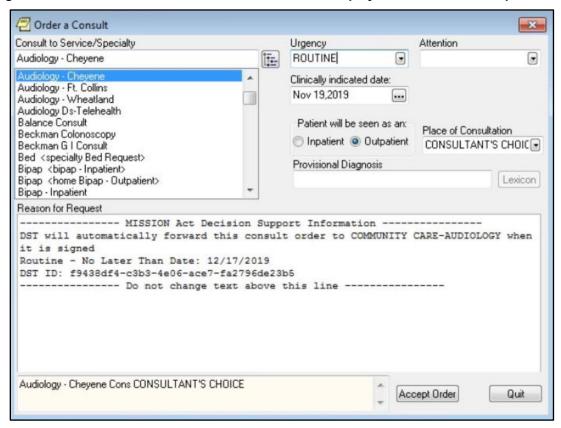
If something went wrong while trying to save, the **DST Save Failed Error Message** displays.

Figure 27: DST Save Failed Error Message



7. To link the DST data to the consult, close the DST Chrome browser tab or close the Chrome browser completely by clicking the **X** in the top right corner. The linked DST data displays in the **Reason for Request** section in the **Order a Consult** window.

Figure 28: CPRS Order a Consult Window: DST Data Displayed in Reason for Request Field



8. Click **Accept Order**. The consult is signed and actual DST information is displayed in the form of a comment. Any changes to DST after a consult is signed will result in a new comment.

Figure 29: DST Data Displayed in Consult Details

```
Reason For Request:
         ----- MISSION Act Decision Support Information --
DST will automatically forward this consult order to COMMUNITY
CARE-AUDIOLOGY when it is signed
Routine - No Later Than Date: 12/17/2019
DST ID: f9438df4-c3b3-4e06-ace7-fa2796de23b5
       ----- Do not change text above this line -----
Inter-facility Information
This is not an inter-facility consult request.
                      PENDING
Last Action: ADDED COMMENT
Facility
Activity
                        Date/Time/Zone
                                            Responsible Person Entered By
CPRS RELEASED ORDER 11/19/19 16:05 MULPURU, PRASHANTI MULPURU, PRASHANTI ADDED COMMENT 11/19/19 MULPURU, PRASHANTI MULPURU, PRASHANTI
              (entered) 11/19/19 16:05
DST-DST ID: f9438df4-c3b3-4e06-ace7-fa2796de23b5
DAF-DST Forwarding: YES
AFD-DST Forward to: COMMUNITY CARE-AUDIOLOGY
CSC-Consult stop code: 203
CSN-Clinical Service: AUDIOLOGY
CST-Consult service type: SPECIALTY CARE
URG-Urgency: ROUTINE
NET-No earlier than date: 11/19/2019
NLT-No later than date: 12/17/2019
CCE-CC Eligibility Status: ELIGIBLE
VCC-Veteran's CC option: OPT IN
DCT-DST CC Best Interest of Vet: NATURE OR SIMPLICITY OF SERVICE
LDT-Shortest average drive time (min): 11
CAT-SECC CoC:
AUDIOLOGY
SEOC - VHA Office of Community Care-----
VHA Office of Community Care - Standardized Episode of Care
```

4.2.2. Capturing Scheduling Information in the VCCPE-Admin Workflow

DST allows you to capture scheduling information in the VCCPE-Admin workflow. To capture the scheduling information, follow the steps listed below:

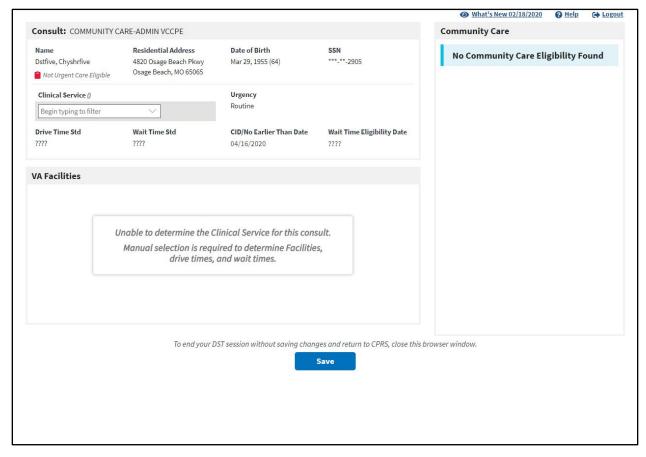


Figure 30: Admin: DST Dashboard

1. Under the Consult section, enter/select the Clinical Services (Specialty Care) name in the field. The VA Facilities section will populate.

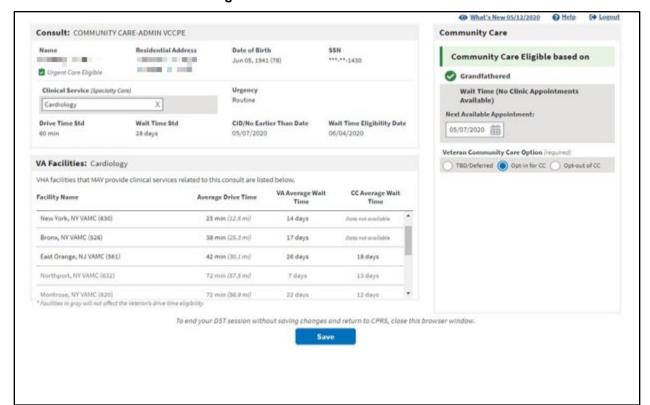


Figure 31: Clinical Service Selected

2. Under the Community Care section, enter/update the Next Available Appointment field. If the Next Available Appointment is updated and is after the No Later Than Date, then the patient will be Wait Time (No Clinic Appointments Available) eligible for Community Care.

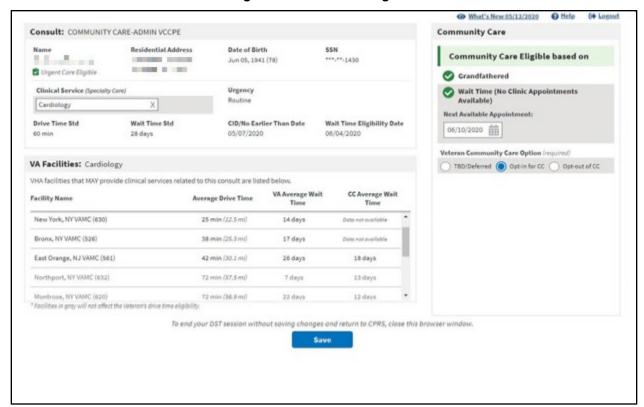
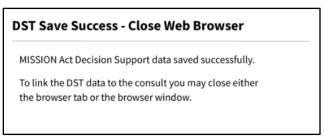


Figure 32: Wait Time Eligible

- 3. If the Veteran is eligible for Community Care, from the Veteran Community Care Choice area, select the Veteran's choice to TBD/Deferred, Opt-in for CC, or Opt-out of CC.
- 4. Once the required DST information is populated the save button will enabled. Click **Save**, the **DST Save Success Message** displays. The information captured on the DST dashboard will now be saved to the consult.

Figure 33: DST Save Success Message



If DST is unable to save due to content missing, the **Unable to Save Message** displays. Update the missing fields and save again.

Figure 34: Missing Required Fields Message



If something went wrong while trying to save, the **DST Save Failed Error Message** displays.

Figure 35: DST Save Failed Error Message



5. To link the DST data to the consult, close the DST Chrome browser tab or close the Chrome browser completely by clicking the **X** in the top right corner. The linked DST data displays in the **Reason for Request** section in the **Order a Consult** window.

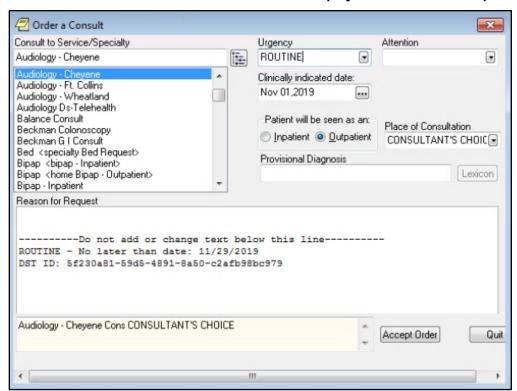


Figure 36: CPRS Order a Consult Window: DST Data Displayed in Reason for Request Field

6. Click **Accept Order**. The consult is signed and actual DST information is displayed in the form of a comment. Any changes to DST after a consult is signed will result in a new comment.

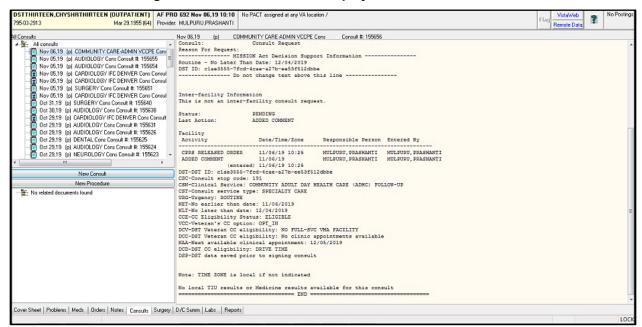


Figure 37: Admin: DST Data Displayed in Consult Details

5. Troubleshooting

5.1. Unable to Lookup Clinical Service

Concurrent to the remote data calls, DST searches an internal table (updated nightly from CDW) to get the Clinical Service for the selected consult and sets the consult type to Primary Care/Mental Health (PC/MH) or Specialty Care based on government-provided mapping data. If the Clinical Service cannot be identified from the CDW tables, a message will be displayed in the VA facilities area to prompt the user to select the Clinical Service manually.

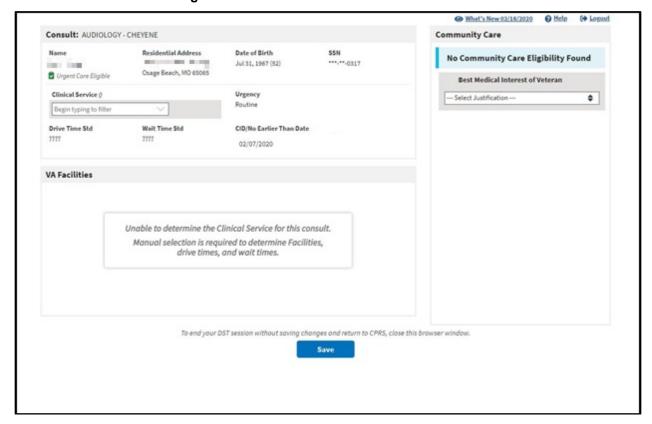


Figure 38: Manual Selection of Clinical Service

5.2. MVI Error Handling

If MVI does not respond within 10 seconds or a single exact match ICN is not returned, an error message is displayed to the user, the error code is logged in the DST database, the rest of the remote data calls are skipped, and the user can continue with the DST workflow. The specific error code will be stored in the DST database and added to comments after consult is signed to support analytics/reporting.

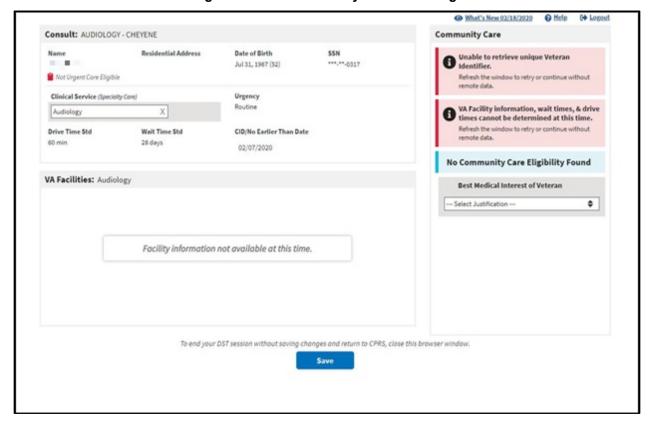


Figure 39: Veteran Identity Error Handling

5.3. Enrollment System (ES) Error Handling

If ES does not respond within 10 seconds or the Veteran ICN is not found, an error message is displayed to the user, the error code is logged in the DST database, the rest of the remote data calls are skipped, and the user can continue with the DST workflow. The specific error code will be stored in the DST database and added to comments after consult is signed to support analytics/reporting.

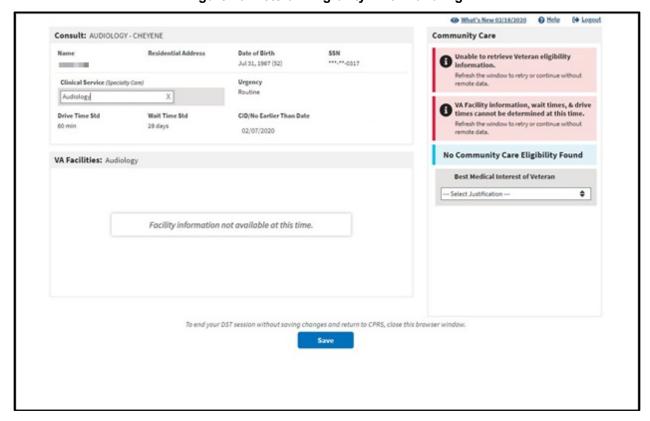


Figure 40: Veteran Eligibility Error Handling

5.4. PPMS Error Handling

If PPMS does not respond within 10 seconds an error message is displayed to the user in the VA Facilities section, the error code is logged in the DST database, Drive Time and Wait Time VCEs displayed with error icons, and the user can continue with the DST workflow. The specific error code will be stored in the DST database and added to comments after consult is signed to support analytics/reporting.

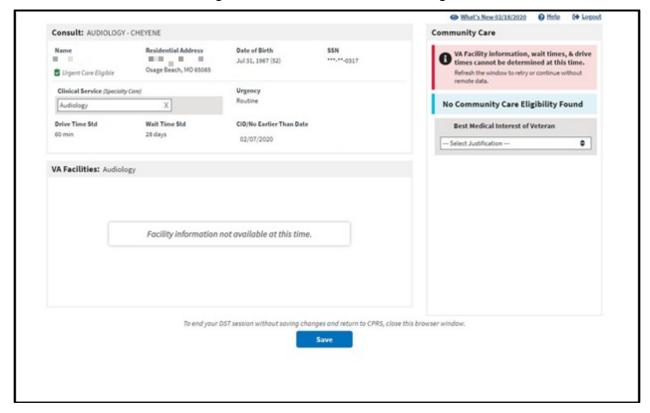


Figure 41: VA Facilities Error Handling

5.5. No Address Available Error

In the event that critical address information is not available from the enrollment system DST will display "No address available" in the patient demographics section. DST will not be able to determine VA facilities in the drive time area and DST will also display an error message in the Community Care section indicating that eligibility information cannot be determined. Please contact the Enterprise Service Desk at 855-NSD-HELP (673-4357) to enter a ticket to contact the enrollment system to update the address information.

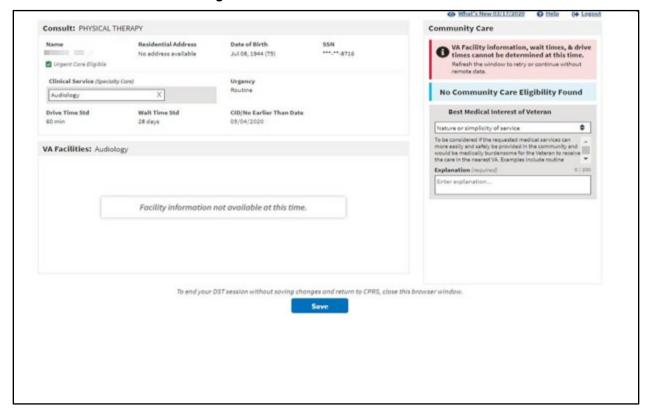


Figure 42: No Address Available Error

5.6. Previously Sent to HSRM Message

When the Consult has been released to HSRM an ICR consult factor is inserted in the Consult comments. When this consult factor is present, DST will notify you that the consult has been sent to HSRM. The consult will no longer be editable from DST so all DST controls will be read-only.

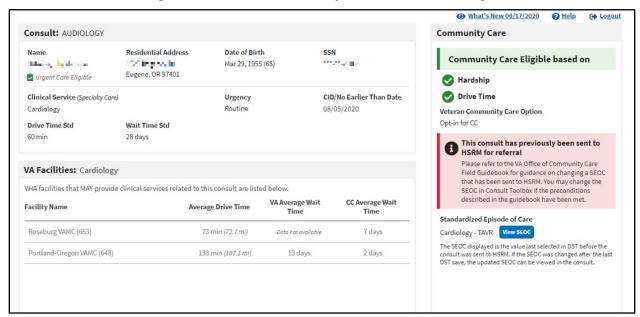
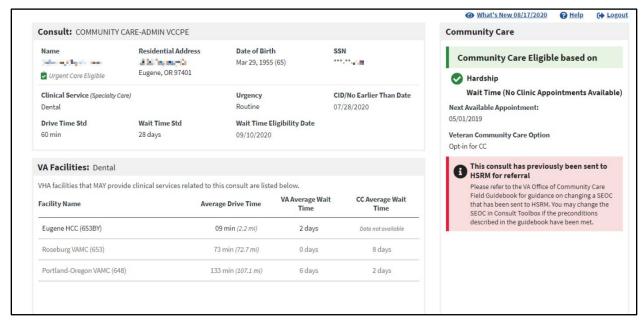


Figure 43: Provider: Previously Sent to HSRM Message

Figure 44: Admin VCCPE: Previously Sent to HSRM Message



6. Acronyms and Abbreviations

Table 2. Acronyms and Abbreviations

Acronym	Definition
API	Application Program Interface
BMI	Best Medical Interest
CC	Community Care
CD2	Critical Decision Point #2
CDW	Corporate Data Warehouse
CHAMPVA	Civilian Health and Medical Program of the Department of Veterans Affairs
CID	Clinically Indicated Date
CITI	CHAMPVA In-house Treatment Initiative
CPRS	Computerized Patient Record System
DST	Decision Support Tool
EMR	Electronic Medical Record
ES	Enrollment System
ICN	Integration Control Number
ID	Identification
IFC	Inter-Facility Consults
MH	Mental Health
MVI	Master Veteran Index
OIT	Office of Information and Technology
PC	Primary Care
PII	Personally Identifiable Information
PPMS	Provider Profile Management System
SEOC	Standardized Episodes of Care
SSN	Social Security Number
SSOi	Single Sign On Integration
TBD	To Be Determined
VA	Department of Veterans Affairs
VCCP	Veteran Community Care Program
VCCPE	Veteran Community Care Program Eligibility
VDL	VA Software Document Library
VHA	Veterans Health Administration
VIP	Veteran-focused Integrated Process
VistA	Veterans Health Information Systems and Technology Architecture