# Accounts Receivable Cross-Servicing Debt Management Center PRCA\*4.5\*347 Release Notes



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# **Revision History**

| Creation<br>Date | Version<br>No. | Description/Comments   | Author(s) |
|------------------|----------------|--|-----------|
| 07/2019          | 1.0            | Updated/added two more reports for patch 347 (10-40% report and 50-100% report)                      | REDACTED  |
|                  |                | Updated 0 to 40 Percent SC Change Reconciliation Report description                                  |           |
|                  |                | Updated to include an AR Status of CANCELLATION to criteria for the 0-40, 10-40, and 50-100 reports. |           |
| 03/2019          | 0.1            | Initial Draft  | REDACTED  |

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## 1 Introduction

The Office of Community Care (OCC) Revenue Operations (RO) is requesting system enhancements to the Veterans Health Information Systems and Technology Architecture (VistA) Accounts Receivable (AR), Cross-Servicing (CS), Debt Management Center (DMC) software modules that will provide new reports to assist users in reviewing 1) the legitimacy of first party bills for Veterans who received a new or updated change to a 0-40% SC eligibility factor and received the change in VistA during the report time frame requested, 2) first party charges receiving IB cancellation for potential refund activities or charge cancellation accuracy, and to identify and monitor cancellation activity productivity so Veteran customers can receive refunds due to them for retroactive eligibility exemptions, 3) all medical care copayment bills containing charges with a distinct date of service on or after the copayment exemption effective date for Veterans with SC Percent equal to 10 to 40%, and 4) all bills containing charges with a distinct date of service on or after the co-payment exemption effective date for Veterans with Primary or Secondary Eligibility equal to 50 to 100% Service Connected.

Current Debt Management Center reports do not provide the level of detail required to adequately review and monitor Veteran debt, which in turn results in the over-taxing of man hours necessary to identify inaccuracies in charges or potential refunds due to Veterans.

# 2 Purpose

These release notes cover the new features provided by patch PRCA\*4.5\*347. All other documents referenced herein can be found on the VA Software Document Library.

## 3 Audience

This document targets users and administrators of the Accounts Receivable (PRCA) product and applies primarily to the changes made by PRCA\*4.5\*347.

## 4 This Release

The following sections provide, in brief, the new features and functions added by patch PRCA\*4.5\*347.

# 4.1 Features and Functionality

This patch provides four new DMC reports and an update to the PRCA RCDMC REFERRAL MENU.

#### 4.1.1 PRCA RCDMC REFERRAL MENU

The PRCA RCDMC REFERRAL MENU has four new report options:

- 1. Option RCDMCR4 0-40 PERC SC CHNG RPT (0 to 40 Percent SC Change Reconciliation Report) added.
- 2. Option RCDMCR5 1ST PARTY IB CANC RPT (First Party Charge IB Cancellation Recon Report) added.

- 3. Option RCDMCR7 10-40% COPAY RPT (10-40% SC Med Care Copay Exempt Chrg Recon Report) added.
- 4. Option [RCDMCR6 50-100SC,PENSION,A&A] (50-100% SC, A&A, Pension Exempt Chrg Recon Report) added.

### 4.1.2 0 to 40 Percent SC Change Reconciliation Report

This report will assist users in reviewing the legitimacy of first party bills for Veterans who received a new or updated change to a 0-40% Service Connected (SC) eligibility factor and received the change in VistA during the report time frame requested. This report prints information on bills/charges without an IB Status of "Cancelled" and with an A/R Status of Active, Suspended, Open, Write-Off, Collected/Closed, Cancellation, or with an IB Bill Status of On Hold, for episodes of care within a user selected time frame.

The report does not include bills for:

- debtors whose Service Connection is 50% or more
- debtors who are receiving a VA pension (regardless of their SC%)
- debtors receiving Aid and Attendance

The User is prompted to enter a beginning and ending date related to the rated disabilities/eligibility change, a beginning and ending date for a VistA last status update date range, and a beginning and ending date for an episodes of care date range. Veterans who meet the above criteria and whose rated disability eligibility has changed during the selected timeframe will be included in the report.

The report allows you to choose whether to print the report in a detailed format, a summary format, or in an Excel format.

It is recommended that you queue this report to a device that is 132 characters wide.

- NOTE: The Med Care Date column will contain either an Outpatient Visit Date OR an Inpatient Discharge Date. The same K # (Bill #) could show on the report with the same date for the event where there was an outpatient date and an inpatient discharge date for the same Veteran.
- **NOTE:** If there is no Rated Disability Original Effective Date, then "NODATE" will be displayed/printed for the RD Orig Date.
- NOTE: Only one row will display/print for a particular rated disability if there is no RD ORIG DATE.

The report output includes Veteran's name, SSN, combined service connected percentage, the VistA last status change date, the rated disability name, the extremity associated with the rated disability (if applicable), the original rated disability date, bill number, charge amount for the bill, medical care date, medication fill date, the prescription number, the prescription name, and the bill status.

## 4.1.3 First Party Charge IB Cancellation Recon Report

This report will assist users in reviewing first party charges receiving Integrated Billing (IB) cancellation for potential refund activities or charge cancellation accuracy, and to identify and monitor cancellation activity productivity so Veteran customers can receive refunds due to them for retroactive eligibility exemptions. The report provides data for first party charges receiving IB cancellation for a user defined bill cancellation date range.

The report provides the option to print only bills with payments or print all bills within the user specified bill cancellation date range. If only bills with payments are printed, the report will include bills with an IB Status of "Cancelled" that have charges AND a payment. If all bills are printed, the report will include bills with an IB Status of "Cancelled" regardless of presence of payments.

The report allows you the option to print the report in an Excel format.

It is recommended that you queue this report to a device that is 132 characters wide.

**NOTE:** This report does not include bills with third-party AR Category Types of "Reimbursable" or "Pre-payments".

The report output includes Veteran name, SSN, bill number, charge amount, medical care date, medication fill date, prescription number, prescription name, IB cancellation date, IB cancellation reason, and cancelled by.

## 4.1.4 10-40% SC Med Care Copay Exempt Chrg Recon Report

The 10-40% SC Med Care Copay Exempt Chrg Recon Report is provided to assist users in reviewing all medical care copayment bills containing charges with a distinct date of service on or after the copayment exemption effective date for Veterans with SC Percent equal to 10 to 40% and does not show prescription copayment bills.

The report captures any medical care copayment charge without an IB status of cancelled, and with an AR Status of Active, Open, Suspended, Write-Off, Collected/Closed, Cancellation, or an IB Status of On-Hold, with a date of service on or after the exemption effective date.

The User can select to run the report for a bill status of Active, Open, Suspended, Collected/Closed, On-Hold, Write-Off, or ALL. The ALL option includes the six noted statuses plus the AR status of Cancellation.

The report allows users to choose whether to print the report in a non-Excel Delimited format or an Excel Delimited format.

It is recommended that users queue this report to a device that is 132 characters wide.

NOTE: The Med Care Date column will contain either an Outpatient Visit Date OR an Inpatient Discharge Date. The same K # (Bill #) could show on the report with the same date for the event where there was an outpatient date and an inpatient discharge date for the same Veteran.

**NOTE:** If a Veteran has more than one bill, the report prints a row for every bill number (K#) they have that meets the report parameters.

**NOTE:** If a bill has a Status of "On-Hold", the Bill number field will be blank.

**NOTE:** If the Veteran record tied to the bill does not have a Co-Payment Exemption Date, the report prints/displays "NODATE" in the EXMPTDT field.

The report output includes Veteran name, SSN, Service Connected percentage, bill number, copay exemption date, medical care date, and bill status.

## 4.1.5 50-100% SC Exempt Charge Reconciliation Report

The 50-100% SC Exempt Charge Reconciliation Report is provided to assist users in reviewing all bills containing charges with a distinct date of service on or after the co-payment exemption effective date for Veterans with Primary or Secondary Eligibility equal to 50 to 100% Service Connected.

The report captures any charges without an IB status of cancelled, and with an AR Status of Active, Open, Suspended, Write-Off, Collected/Closed, Cancellation, or an IB Status of On-Hold, with a date of service on or after the exemption effective date.

The User can select to run the report for a bill status of Active, Open, Suspended, Collected/Closed, On-Hold, Write-Off, or ALL. The ALL option includes the six noted statuses plus an AR status of Cancellation.

The report allows users to choose whether to print the report in a non-Excel Delimited format or an Excel Delimited format.

It is recommended that users queue this report to a device that is 132 characters wide.

NOTE: The Med Care Date column will contain either an Outpatient Visit Date OR an Inpatient Discharge Date. The same K # (Bill #) could show on the report with the same date for the event where there was an outpatient date and an inpatient discharge date for the same Veteran.

**NOTE:** The Med Care Date will be blank if the charge is for a medication.

*NOTE:* The RxFillDt will be blank if there is a Med Care Date.

**NOTE:** The RX# and RX Name will be blank if the charge is for medical care.

**NOTE:** If a Veteran has more than one bill, the report prints a row for every bill number (K#) they have that meets the report parameters.

**NOTE:** If a bill has a Status of "On-Hold", the Bill number field will be blank.

NOTE: If the Veteran record tied to the bill does not have a Co-Payment Exemption Date, the report prints/displays "NODATE" in the EXMPTDT field and only prints one row of information if the Debtor has at least one bill matching the selected "Status" (e.g. Active, Open, Suspended, Collected/Closed, Write-Off, On-Hold).

The report output includes Veteran name, SSN, Service Connected percentage, bill number, copay exemption date, medical care date, Rx fill date, Rx number, Rx name, and bill status.

# 4.2 Upgrades

No upgrade information applies.

## 4.3 Known Issues

None at this time.

## 4.4 Product Documentation

The following documents (located from the <u>VA Software Document Library</u>) apply to this release:

- Accounts Receivable 4.5 Technical Manual
- Debt Management Center (DMC) User Guide
- Deployment, Installation, Back-Out, and Rollback Guide (PRCA\*4.5\*347)