

## ASSIGNMENT AND MAINTENANCE OF STATION NUMBERS AND ATTRIBUTES

**1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) Directive provides policy for the assignment and maintenance of station numbers, station number suffixes, and station number attributes to all VHA sites of care which require unique identification. ***NOTE:** The requirements of this Directive will not be implemented until October 1, 2016.*

**2. SUMMARY OF MAJOR CHANGES:** This new Directive provides a mechanism for improved identification of VHA sites of care, workload tracking, and reporting. Under this new VHA Directive:

a. Existing station numbers will remain intact; and sites will have a field within the VHA Site Tracking (VAST) system denoting their classification. Newly approved sites of care and existing sites of care without station numbers will receive station numbers.

b. A new station number will not be assigned to replacement facilities except when a replacement medical center is built at a location different from the medical center which it replaces. Such requests from the Veterans Integrated Service Network Director and approved by the Deputy Under Secretary for Health for Operations and Management must contain a statement specifying that the new building will be situated at a location different than the current site of the medical center which it replaces, with a justification on why the same station number cannot be used.

**3. RELATED ISSUES:** VHA Directive 1731, VHA Handbook 1006.1, and VHA Handbook 1006.02.

**4. RESPONSIBLE OFFICE:** The Office of the Deputy Under Secretary for Health for Operations and Management (10N) is responsible for the content of this Directive. Questions may be referred to 202-461-5665.

**5. RESCISSIONS:** VHA Directive 2008-048, dated August 22, 2008 is rescinded.

**6. RECERTIFICATION:** This VHA Directive is scheduled for recertification on or before the last working day of March 2021.

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## ASSIGNMENT AND MAINTENANCE OF STATION NUMBERS AND ATTRIBUTES

### 1. PURPOSE

This Veterans Health Administration (VHA) Directive provides policy for the assignment and maintenance of station numbers, station number suffixes, and station number attributes to all VHA sites of care which require unique identification. **NOTE:** *The requirements of this Directive will not be implemented until October 1, 2016.*

**AUTHORITY:** 38 U.S.C. 7301(b).

### 2. BACKGROUND

a. Facility classification definitions were established by the VHA Policy Board in 1998. Since that time, VHA has initiated several sites for delivering care. Informally, these sites have been known as health care centers, outreach clinics, annex clinics, and mobile clinics. A clear, concise, and common set of terms providing new standardized definitions and names of the major points of health care service across the country has recently been developed to allow for monitoring and tracking systems developed to capture workload and other information from clinical sites of care.

b. Station numbers are the official identification numbers for funding and budgetary purposes, and for describing the sphere of authority of an organizational entity designated by the Secretary of Veterans Affairs. A uniform station numbering system provides a unique identifier for each station and allows for easier association and integration among data systems. Department of Veterans Affairs (VA) station numbers are administered on a centralized basis by the Office of Management, Deputy Assistant Secretary (DAS) for Finance, VA's Accounting Classification Structure, Volume II – Chapter 1. **NOTE:** *The process for reservation and assignment of station number suffix identifiers can be accessed on the VHA Support Service Center Operation & Planning Tools SharePoint page at: <http://planning.vssc.med.va.gov/VAST/Pages/default.aspx>. This is an internal VA Web site that is not available to the public.*

c. The VHA Site Tracking (VAST) database contains the station number, name and station attributes in a database as the authoritative source.

### 3. POLICY

It is VHA policy that all clinical sites of care with a unique street address must have a unique station number.

### 4. RESPONSIBILITIES

a. **Deputy Under Secretary for Health for Operations and Management.** The Deputy Under Secretary for Health for Operations and Management is responsible for:

(1) Reviewing submitted documents and concurring with all requests for station number reservations, activations, relocations, changes, and deactivations, and ensuring that proper approvals have been completed.

(2) Ensuring that all communications and notifications have occurred prior to relocation, activation or deactivation, and are documented and maintained in the VAST system.

(3) Tracking and monitoring the station numbers assigned to distinct clinical sites of care, with different addresses in the VAST system.

(4) Coordinating and consulting with Office of Management, Deputy Assistant Secretary for Finance (DAS) to ensure station number reservations, activations, changes, and deactivations are executed and VHA and DAS systems of records are in alignment.

b. **Veterans Integrated Service Network Director.** Each Veterans Integrated Service Network (VISN) Director, or designee, is responsible for.

(1) Requesting station numbers to be reserved for new approved sites of care prior to location approval and activation of the site. The request is to be signed by the VISN Director, addressed to the DAS for Finance, through the Deputy Under Secretary for Health for Operations and Management and submitted through the VAST system.

(2) Requesting location endorsement prior to activation (for new sites of care) or relocation (for existing sites of care) in the VAST system.

(3) Seeking approval for activation or deactivation (temporary [60 days or greater] or permanent) of a site of care in the VAST system. Approval methods vary, but deactivation requires approval from the Secretary of Veterans Affairs.

(4) Communicating with stakeholders about any new sites of care, any substantive operational changes in existing sites of care, and keeping all documentation of the communications.

(5) Requesting reserved station numbers be activated or activated station numbers be deactivated at least 60 days prior to activation or deactivation in the VAST system. The request is to be signed by the VISN Director, addressed to the DAS for Finance, through the Deputy Under Secretary for Health for Operations and Management.

(6) Reporting changes and requesting approval, where appropriate, on any changes in address, ownership, phone number, or a site's attributes in the VAST system.

c. **Department Heads, Assistant Secretaries, and other Key Officials.** Department heads, Assistant Secretaries, and other key officials are responsible for ensuring that no new or revised instructions are issued or approved that would result in the development or perpetuation of a station numbering system different from the official VA system, regardless of the expected extent of use.

## 5. REFERENCES

- a. VA Financial Policies and Procedures, Accounting Classification Structure, Volume II – Chapter 1A at: <http://www.va.gov/finance/policy/pubs/volumell.asp>
- b. VHA Directive 2009-001, Restructuring of VHA Clinical Programs, or subsequent policy issue.
- c. VHA Handbook 1006.02, Site Classifications and Definitions.
- d. VHA Health Care Planning Model, VHA Access Expansion Plan at: <http://vaww.vssc.med.va.gov/HCPM/Home.aspx>. **NOTE:** *This is an internal VA Web site that is not available to the public.*
- e. VA Directive 0011, Strategic Capital Investment Planning Process at: [http://www.va.gov/vapubs/viewPublication.asp?Pub\\_ID=575&FType=2](http://www.va.gov/vapubs/viewPublication.asp?Pub_ID=575&FType=2)
- f. VA Handbook 0011, Strategic Capital Investment Planning Process at: [http://www.va.gov/vapubs/viewPublication.asp?Pub\\_ID=574&FType=2](http://www.va.gov/vapubs/viewPublication.asp?Pub_ID=574&FType=2)

## 6. DEFINITIONS

- a. **Station Number.** The station number identifies unique points of service within VHA. The station number is used by the VHA site classification process to identify the workload associated with individual sites of care. The station number list is maintained by the VA Office of Financial Services Center and is tracked by point of service using the VAST database.
- b. **Suffix Modifier.** A suffix modifier is an appendage to the station number of up to three positions used to identify substation elements attached to a parent station.
- c. **VA Medical Center.** A VA medical center is a VA point of service that provides at least two categories of care (inpatient, outpatient, residential rehabilitation treatment, or institutional extended care). The definition of VA medical center does not include Vet Centers as an identifying service.
- d. **VHA Site Tracking Database.** The VHA Site Tracking Database (VAST) database records all unique sites of care for official counting and recording purposes. The VAST database is managed by the Chief Business Office and the Office of Informatics and Analytics.

## PROCEDURES

### 1. RESERVATION OF THE STATION NUMBER

a. As new sites of care requiring a station number are approved and endorsed through appropriate processes, in accordance with the Veterans Health Administration (VHA) Process Flow for New Sites and Services, including the Access Expansion Plan, Strategic Capital Investment Plan (SCIP), and Restructuring of VHA Clinical Programs, the Veterans Integrated Service Network (VISN) Director provides a signed memo requesting the station number reservation in the Department of Veterans Affairs (VA) VHA Site Tracking (VAST) automated system. The request must include the VISN name of the site of care parent facility name and number, and must have the appropriate approval attached. The request (in memorandum form) is forwarded to the Deputy Under Secretary for Health for Operations and Management for approval.

b. The memorandum is reviewed for completeness and to ensure the appropriate approvals were attached. If appropriate, it is approved by Deputy Under Secretary for Health for Operations and Management.

c. The Deputy Under Secretary for Health for Operations and Management signs and submits the formal request to the Office of Management, Deputy Assistant Secretary (DAS) for Finance to reserve a station number suffix identifier in the VAST system.

d. The DAS for Finance assigns and reserves the station number and appropriate suffix for the new site of care within 10 working days after receipt of the request, enters the number in the VAST system, and formally notifies the Deputy Under Secretary for Health for Operations and Management, the Deputy Secretary for Health for Policy and Services, and all VHA Data Offices as appropriate.

### 2. LOCATION ENDORSEMENT

Once a final location is selected for a new site of care, the VISN Director seeks the approval for the new location in the form of a memorandum in VAST to the Deputy Under Secretary for Health for Operations and Management for approval prior to requesting activation. Once the location is approved, and the new site of care is nearing time for activation, the VISN Director must conduct and document all communications with Stakeholders about the new or changed site of care.

### 3. ACTIVATION OF THE STATION NUMBER

a. At least 90 days prior to activation of the site of care in the VAST system, the VISN Director must provide a signed request to activate the previously reserved station number. Requests to activate station numbers must go through the VAST system to the Deputy Under Secretary for Health for Operations and Management. All station number activation requests must include the following information in the request memo:

- (1) VISN name and number.

- (2) Previously reserved facility station number.
- (3) Common station name/location descriptive name.
- (4) Parent station name and number.
- (5) Actual (effective) activation date.
- (6) Ownership (contracted\*/leased/VA-owned).

\*If contracted, the number of sites included in the contract.

(7) Joint staffed or Department of Defense (DoD) or Indian Health Service (IHS) or both.

- (8) Mailing address.
- (9) Phone numbers:
  - (a) Main phone number.
  - (b) After hours phone number.
  - (c) Enrollment coordinator phone number.
  - (d) Station fax number.
  - (e) Patient advocate phone number.
- (10) Daily operational hours.
- (11) The point of contact for the request:
  - (a) Phone number.
  - (b) Email address.

b. The Deputy Under Secretary for Health for Operations and Management approves as appropriate, and forwards the approved activation request to the DAS for Finance in the VAST system.

c. Within 15 working days after receipt of the official request, the DAS for Finance activates the station number and makes appropriate distribution of the activation notification within VHA Central Office and all VHA Data Offices, as appropriate. This activation must be approved electronically in the VAST system. **NOTE:** *The Office of the Deputy Under Secretary for Health for Operations and Management and the Office*

*of Informatics and Analytics are the official department sources for inquiries regarding the total number of outpatient clinics and sites of care in operation.*

#### **4. REQUESTS TO CHANGE STATION NUMBER**

a. Requests to change station numbers, due to facility integrations, closures or changes in the classification of the site, must be submitted in writing by the parent facility Director through the appropriate VISN Director to the Deputy Under Secretary for Health for Operations and Management.

b. The Deputy Under Secretary for Health for Operations and Management approves as appropriate, and forwards the approved activation request to the DAS for Finance in the VAST system.

c. Within 15 working days after receipt of the official request, the DAS for Finance makes the change and provides the formal notification to all appropriate officers.

#### **5. CHANGES TO STATION ATTRIBUTES**

a. Requests to change a station attribute, such as address, phone number, etc., are classified into two categories (Minor and Major), with differing approval requirements. The approval requirements for Major and Minor categories are:

(1) Minor changes include changes to phone number, operational hours, leadership names, etc., and are approved at the VISN level.

(2) Major changes such as addresses, methods of operation, official name, etc., must be approved at the Deputy Under Secretary for Health for Operations and Management level.

b. These changes must be requested using VAST database.

#### **6. DEACTIVATION OF STATION NUMBERS (TEMPORARY OR PERMANENT)**

a. Requests to deactivate a station number require a White Paper and Cover memo prepared and entered into the VAST System for the Deputy Under Secretary for Health for Operations and Management, the Under Secretary for Health, and the Secretary of Veterans Affairs' approval and signature.

(1) This package is managed by the appropriate 10N VISN Support Team for review and routing for approval.

(2) The VISN Director conducts and documents all communications with stakeholders about the deactivation of the site of care.

b. Any cessation of operations for 60 days or longer is considered a temporary deactivation and must be reported in the VAST system along with the causative nature of the change in operations with an estimated date of reactivation. Reactivations are

also requested in the VAST system. Only temporarily deactivated sties can be reactivated. Temporary deactivations are limited to a maximum of 6 months.

c. The Deputy Under Secretary for Health for Operations and Management, the Under Secretary for Health, and the Secretary of Veterans Affairs concur as appropriate; then the appropriate 10N VISN Support Team forwards the approved permanent deactivation request to DAS for Finance in the VAST system.

d. Within 15 working days after receipt of the official request, the DAS for Finance makes the change, records the change in the VAST system, and provides the formal notification.



**STATION NUMBER GROUPS**

The three digit station number groupings and areas of responsibility for each are as follows:

<b>Station Number Range</b>	<b>Functional Areas of Responsibility</b>
100-199	Central activities
200-299	Automation Center or Benefits Delivery Centers
300-399	Veterans Benefit Administration (VBA) activities
400-499	Medical Centers, Department of Veterans Affairs (VA) Medical and Regional (VBA) Offices co-located, Veterans Integrated Service Network (VISN)
500-699 and 776-777	Veterans Health Administration (VHA) activities
700-775 and 778-799	Miscellaneous: Supply Depots, Marketing Centers, CHAMPVA, Inspector General Offices, National Cemetery Memorial Service Networks (MSNs), National Cemetery Field Support Facilities, Canteen Service Field Offices, Prosthetics Center, National Railroad Retirement Board*, National Personnel Records Center* (military records), Army Reserve Personnel Center*), Office of Resolution Management Field Offices, Consolidated Patient Account Centers (CPAC), National Patient Safety
800-999	National Cemeteries, Manila Outpatient Clinic (964) Western Area Office (999)

*\*These three non-VA activities require station numbers to access the Beneficiary Identification and Records Locator Subsystem (BIRLS).*

**DEPARTMENT OF VETERANS AFFAIRS (VA) SYSTEM WIDE LISTING OF STATION IDENTIFIERS AND SUFFIXES**

Substation Type	Abbreviation	Suffix Modifier or Classification Range
VBA Substation	VBASUB	AA - AZ
*VA Medical Center	VAMC	A4-A9
*VA Clinic <i>(Includes: VA Health Care Center (HCC), Community-Based Outpatient Clinic (CBOC), both Primary Care CBOC &amp; Multi-Specialty CBOC, and VA Other Outpatient Service Sites (OOS Sites)- to include Mobile Clinics)</i>	HCC CBOC OOS	HCC Classification: BY-BZ CBOC Classification: GA-GZ; G1-G9; JA-JZ; J1-J9 OOS Classification: QA-QZ; Q1-Q9
*VA Community Living Center	CLC	9AA-9AE
Community Nursing Home	CNH	9AK-9AZ
State Veterans Home - Nursing Home	STNH	9AF-9AJ
State Veterans Home - Domiciliary	STHOME	DT-DZ; EA-ES
*VA Domiciliary and other Mental Health Residential Rehabilitation Treatment Programs or Residential Care Site (excluding Compensated Work Therapy-Transitional Residence)	VADOM PRRTP	BU-BX
Non-VA Hospital (Army)	NVAHA	CN - CS
Non-VA Hospital (Navy)	NVAHN	CT - CY
Non-VA Hospital (Air Force)	NVAHAF	C0-C4; CZ
Non-VA Hospital (Public Health Service)	NVAHPHS	C5-C9; DA
Non-VA Hospital (Other Federal)	NVAHOF	DB - DG
Non-VA Hospital (Public)	NVAHP	DH - DM
Non-VA Hospital (Civil)	NVAHC	DN - DS
Employee Education System	EES	D2-D9; E2-E9; F2-F9
History File Construction	HFC	FA-FS
Integrated Disability Evaluation System	IDES	MA - MZ
*Compensated Work Therapy-Transitional Residence	CWT/TR	PA-PN
National Suicide Hotline Call Center	NSHCC	SH1 – SH9

\* As of October 1, 2014, VHA Classification Policy was reformatted to align with requirements. Approved sites of care will receive station number suffixes consistent with their conditional (intended) classification. Station numbers and suffixes will not change based on subsequent changes in classifications. Over time, it is possible suffix identifiers will not be directly associated with site classifications as the site classifications may change with the annual classification update.