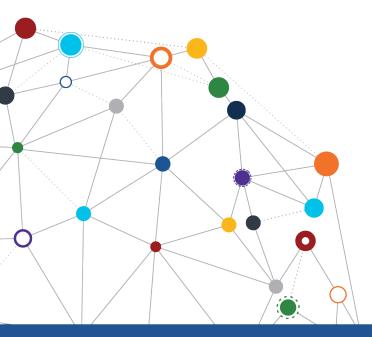


# HealthShare Referral Manager Community Provider User Guide

*Community Care Referral and Authorization (CCRA) Managed Services* 

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**U.S. Department of Veterans Affairs** 

Office of Information and Technology Development, Security, and Operations



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# **1** Introduction

#### 1.1 Project and Solution Overview

Community Care Referral and Authorization (CCRA) is an enterprise-wide system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community. Clinical and Department of Veterans Affairs (VA) community care staff located at VA medical centers (VAMCs), outpatient clinics, community-based outpatient clinics (CBOCs), and Veterans Integrated Service Network (VISN) offices use this solution to enhance Veteran access to care. The HealthShare Referral Manager (HSRM) application is an integral component of both the CCRA system and community care information technology (IT) architecture that allows Veterans to receive care from community providers.

HSRM allowed VA to transition from a largely manual process to a more streamlined process that generates standardized referrals and authorizations according to clinical and business rules. HSRM supports clinical and administrative processes that:

- » Seamlessly provide eligible Veterans with prompt referrals to a community provider of their choice
- » Provide community providers with referrals and authorizations consistent with industry standards
- » Decrease the administrative burden on VA clinical and community care staff members by establishing clinical and business pathways that reflect best practices, consistent outcomes, and reduced turnaround times, along with a solution that automates those pathways
- » Facilitate communication between community care staff, third-party administrators (TPAs), and community providers via a unified platform that enables the secure exchange of medical information

HSRM allows VA and community providers to better manage community care referrals and authorizations, resulting in simpler processing for VA and community providers and enhanced patient experience for Veterans.

### 1.2 User Guide Overview

Community providers play a key role in delivering high quality care to Veterans in their communities. HSRM enables community providers to receive and process referrals from VA and share information faster and more accurately than ever before. Community providers, VA, and Veterans all benefit from this new system. This user guide provides details about the community provider's role in processing referrals in HSRM and how to maximize system functionality.

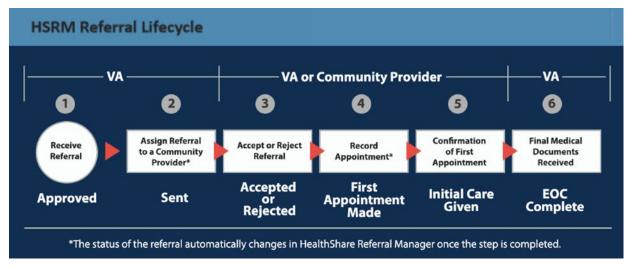
» Note: HSRM will be down for routine maintenance on the second Tuesday of every month from 10:00 p.m. to 4:00 a.m. Eastern Time. During this time, users will be unable to access the system.



# 2 HSRM Lifecycle

A referral's lifecycle begins when the referral is received in HSRM, and it ends when the episode of care (EOC) is complete, and all medical documentation has been received. There are six steps in the lifecycle. Community providers complete steps 3, 4, and 5, as shown in the referral lifecycle diagram.





The referral lifecycle model in **Figure 1** shows the steps occurring in the following order, with VA performing steps 1, 2, and 6, and VA or the community provider performing steps 3 through 5:

- » Step 1 is receiving the referral.
- » Step 2 is assigning the referral to a community provider.
- » Step 3 is accepting or rejecting the referral.
- » Step 4 is recording the appointment.
- » Step 5 is confirming the first appointment.
- » Step 6 is receiving the final medical documents. This is performed by VA and completes the EOC.
  - » Note: A referral in any status will automatically update to EOC Complete 180 days after the referral expiration date.

# **3** Accessing HSRM

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

To be eligible for HSRM, your facility must have an active Community Care Network (CCN) agreement with TriWest or Optum or have a Veterans Care Agreement (VCA) with VA.

Follow the steps below to sign up for HSRM.

» Note: Links to all documents are on the Office of Community Care web page.



- Attend a training webinar on <u>Veterans Health Administration (VHA) Training Finder Realtime Affiliate Integrated Network</u> (TRAIN), complete the online community provider selfpaced eLearning series on <u>VHA TRAIN</u> (11 modules), or refer to this guide to learn how to use HSRM.
- 2. Refer to the ID.me user guide to sign up for an ID.me account at the <u>ID.me website</u>.
- 3. The facility point of contact from your organization fills out the End User Tracker (EUT) with information for staff requiring HSRM access, then submits the EUT to <u>hsrmsupport@va.gov</u>.
  - » Note: Please ensure the email addresses entered in the EUT match those used for each respective user's ID.me account.
- 4. The HSRM Help Desk provides the facility point of contact with confirmation that staff access has been granted.
- 5. All end users access HSRM via the CCRA website at <u>https://ccracommunity.va.gov</u>.
  - » Note: Users must log in to HSRM at least once every 60 days to maintain their access. If your HSRM account is deactivated, email <u>hsrmsupport@va.gov</u> to request reactivation.

Once these steps are complete, contact the VA medical center(s) you work with to let them know you have access to HSRM and to discuss your transition to use HSRM.

# 4 Working in HSRM

#### 4.1 Locate a Referral

HSRM allows community providers to locate referrals more quickly and manage them according to their priority. When logging in to the system, the **Referral List** screen—which is also the home screen—appears. The **Referral List** screen features a user to-do list; it shows all of the referrals from VA in a central location and allows users to locate referrals.

Users can locate referrals by sorting the **Referral List** or by using the **Find Referrals** or **Find Referral by Patient** features.

#### 4.1.1 Basic Sort

The **Basic Sort** feature allows users to rearrange all lists in HSRM by column heading. Sorting the **Referral List** allows users to view the information in any column in ascending or descending order. The default view lists referrals by **Date Added** in descending order, making it easy to see the referrals most recently sent from VA.

To locate a referral by using the **Basic Sort** feature:



- 2. Select a column heading to sort data in ascending order by that category. Select it a second time to sort in descending order. Select it a third time to sort by the default, which is **Date Added**, descending.
- 3. Select the row of the relevant referral to access the **Referral Details** screen.

≡⋒						HSRM - QA	- R21 MR	Adhoc 1						👤 HSRM	Training
Referral List											Sorted by Date Add	ed Toggle N	Multipl	le Selection	1
> Referrals															
	Last Name	First Name 🗘	Date of Birth	SSN 🗘	Service 🗘	Priority 🗘	Optional Task(s)	Date Added \$	Referral Number	Category of Care 🗘	Status 🗘	Community Provider / Facility		Appt Date ≎	
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Pulmonary Function Testing SEOC 1.4.3	Routine		10/25/2022	VA000006243	PULMONARY	First Appointment Made	VACCN TEST Facility		10/27/2022	
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Orthopedics General_PRCT SEOC 1.0.13	Routine		10/25/2022	VA000006239	ORTHOPEDIC	First Appointment Made	VACCN TEST Facility		12/01/2022	
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Cath - PCI SEOC 1.1.11 PRCT REV	Routine		10/25/2022	VA000006235	CARDIOLOGY	First Appointment Made	VACCN TEST Facility		11/15/2022	
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Comprehensive_PRCT SEOC 1.4.13	Routine		10/25/2022	VA000006242	CARDIOLOGY	Sent	VACCN TEST Facility			
Togus VA Medical Center	ONE	Veteran	01/01/1900	00000000	Acupuncture Chronic Care Management SEOC 1.1.9	Routine		10/25/2022	VA000006241	COMPLEMENTARY A		VACCN TEST Facility			

Figure 2: Referral List

# 4.1.2 Advanced Sort

The **Advanced Sort** feature provides multiple criteria by which users can sort any **Referral List** in HSRM.

To locate a referral by using the **Advanced Sort** feature:

- 2. Select the hyperlink on the **Referral List** to display the **Advanced Sort** (screen readers call this "Referral List sorted **Date Added** descending, press enter to open sorting options").

≣						HSRM - QA	- R21 MR1	Adhoc 1					👱 HSRM	Training
Referral List											Sorted by Date Adde	d Toggle I	Multiple Selection	1
> Referrals														
Referring Facility	Last Name	First Name	Date of Birth	SSN 🗘	Service 🗘	Priority 🗘	Optional Task(s)	Date Added	Referral Number	Category of Care 🗘	Status 🗘	Community Provider / Facility	C Appt Date C	
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Pulmonary Function Testing SEOC 1.4.3	Routine		10/25/2022	VA000006243	PULMONARY	First Appointment Made	VACCN TEST Facility	10/27/2022	
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Orthopedics General_PRCT SEOC 1.0.13	Routine		10/25/2022	VA0000006239	ORTHOPEDIC	First Appointment Made	VACCN TEST Facility	12/01/2022	
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Cath - PCI SEOC 1.1.11 PRCT REV	Routine		10/25/2022	VA000006235	CARDIOLOGY	First Appointment Made	VACCN TEST Facility	11/15/2022	
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Comprehensive_PRCT SEOC 1.4.13	Routine		10/25/2022	VA000006242	CARDIOLOGY	Sent	VACCN TEST Facility		
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Acupuncture Chronic Care Management SEOC 1.1.9	Routine		10/25/2022	VA000006241	COMPLEMENTARY INTEGRATIVE HEA		VACCN TEST Facility		



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✓ (referred to as the Descending icon for screen readers) associated with the specific criterion for the sort. In the case shown below, Last Name and Date of Birth have been selected in ascending order. After selecting **Apply**, the referrals will be sorted according to the chosen criteria. Select the row of the relevant referral to view the **Referral Details** screen.

Figure 4: Sorting Options

≣													Primary Sort		
Referral List								_		_		Sorte	Appt Date	^	
Referrals													Assigned User	^	•
coinned licer *	Referring Facility 2	Last Name ^	First Name ^			Service 1	Priority 0	Optional	Date Added ^	Referral Number *	Category of Care 0		Category of Care	^	•
angline over ç			Veteran					Task(s)					Community Provider / Facility	^	•
	Togus VA Medical Center			01/01/1900		Neuro-Ophthalmology_REV_PRCT SEOC 1.3.6	Routine				OPHTHALMOLOGY	Approve	Date Added	^	•
	Togus VA Medical Center		Veteran	01/01/1900		Dermatology Comprehensive_PRCT SEOC 1.0.11	Routine		10/11/2023		DERMATOLOGY	Approve	Date of Birth	~	•
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Radiology CT Scan_REV_PRCT SEOC 1.0.8	Routine		10/11/2023	VA000006845	RADIOLOGY CT SCAN	Approve	First Name	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Radiology MRI - MRA_REV_PRCT SEOC 1.0.10	Routine		10/11/2023	VA000006845	RADIOLOGY MRVMRA	Approve	Last Name	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Gastroenterology Comprehensive_REV_PRCT SECC 1.1.10	Routine		10/11/2023	VA000006844	GASTROENTEROLOGY	Approve	Priority	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Sleep Medicine_REV_PRCT SEOC 1.1.11	Routine		10/10/2023	VA000006843	SLEEP	Approve	Referral Number	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Orthopedics General_REV_PRCT SEOC 1.0.15	Routine		10/10/2023	VA000006842	ORTHOPEDIC	Approve	Referring Facility	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Dermatology Comprehensive_PRCT SEOC 1.0.11	Routine		10/09/2023	VA000006841	DERMATOLOGY	Approve	Service	^	•
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Neurology_REV_PRCT SEOC 1.0.12	Routine		10/09/2023	VA000006840	NEUROLOGY	Approve	SSN	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Neuro-Ophthalmology_REV_PRCT SEOC 1.3.6	Routine		10/09/2023	VA000006839	OPHTHALMOLOGY	Approve	Status	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Orthopedics General_REV_PRCT SEOC 1.0.15	Routine		10/09/2023	VA000006838	ORTHOPEDIC	Approve	Secondary Sort		
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Cath - PCI_REV_PRCT SEOC 1.1.13	Routine		10/09/2023	VA000006837	CARDIOLOGY	Approve	Appt Date	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Hematology_REV_PRCT SEOC 1.0.14	Routine		10/09/2023	VA000006836	HEMATOLOGY	Approve	Assigned User	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Neurology_REV_PRCT SEOC 1.0.12	Routine		09/06/2023	VA000006835	NEUROLOGY	Approve	Category of Care	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900		Orthopedics General REV PRCT SEOC 1.0.15	Routine		09/06/2023	VA000006834	ORTHOPEDIC	Approve	Community Provider / Facility	^	
	Togus VA Medical Center		Veteran	01/01/1900		Hematology REV PRCT SEOC 1.0.14	Routine		09/06/2023		HEMATOLOGY	Approve	Date Added	^	•
	Togus VA Medical Center		Veteran	01/01/1900		Cardiology Comprehensive REV PRCT SEOC 1.4.16	Routine		09/06/2023	VA000006832		Approve	First Name	^	
													Last Name	~	j
	Togus VA Medical Center		Veteran	01/01/1900		Urology Testing_PRCT SEOC 1.1.1	Routine				UROLOGY	Approve	Priority	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Gastroenterology Comprehensive_REV_PRCT SECC 1.1.10	Routine		09/06/2023	VA000006830	GASTROENTEROLOGY	Approve	Referral Number	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Acupuncture Chronic Care Management SEOC 1.1.11	Routine		09/06/2023	VA000006829	COMPLEMENTARY AND INTEGRATIVE HEALTH	Approve	Referring Facility	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Hematology_REV_PRCT SEOC 1.0.14	Routine		09/06/2023	VA000006828	HEMATOLOGY	Approve	Service	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Dermatology Comprehensive_PRCT SEOC 1.0.11	Routine		09/06/2023	VA000006827	DERMATOLOGY	Approve	SSN	^	•
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Neuro-Ophthalmology_REV_PRCT SEOC 1.3.6	Routine		09/06/2023	VA000006826	OPHTHALMOLOGY	Approve	Status	^	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Orthopedics General_REV_PRCT SEOC 1.0.15	Routine		09/06/2023	VA000006825	ORTHOPEDIC	Approve	Rese		

#### 4.1.3 Find Referrals

In addition to sorting the Referral List, community providers can search for referrals in HSRM using the **Find Referrals** feature. Users can search by referral number, Unique Consult ID, network, treating specialty, provider name, service requested, category of care, date added from, date added to, priority, source of referral, status, and optional task(s).

» Note: The Status field is mandatory and has multiple statuses selected by default. Users can choose from Accepted, First Appointment Made, Initial Care Given, Rejected, and Sent by removing those that are not desired.

To find referrals:

- 1. Select the **Menu** icon (also called link menu for screen readers) from any screen to view the Main Menu.
- 2. Select Find Referrals to navigate to the Referral Search screen.

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Figure 5: Find Referrals

US Department of	- 5								Sorted by Date Add	ed Toggie N	lultiple Selection	:
U.S. Department of Veterans Affairs												-
Search	0	SSN 🗘	Service \$	Priority 🗘	Optional Task(s)		Referral Number	Category of Care 🗘	Status 🗘	Community Provider / Facility	≎ Appt Date ≎	
Find Referral by Patient Find Referrals	10	000000000	Pulmonary Function Testing SEOC 1.4.3	Routine		10/25/2022	VA0000006243	PULMONARY	First Appointment Made	VACCN TEST Facility	10/27/2022	
Referral List Task List	10	000000000	Orthopedics General_PRCT SEOC 1.0.13	Routine		10/25/2022	VA000006239	ORTHOPEDIC	First Appointment	VACCN TEST Facility	12/01/2022	
Reports Tools	0	000000000	Cardiology Cath - PCI SEOC 1.1.11 PRCT REV	Routine		10/25/2022	VA000006235	CARDIOLOGY	Made First Appointment	VACCN TEST Facility	11/15/2022	
	0	000000000	Cardiology Comprehensive_PRCT SEOC 1.4.13	Routine		10/25/2022	VA000006242	CARDIOLOGY	Made Sent	VACCN TEST Facility		
	0	000000000	Acupuncture Chronic Care Management SEOC 1.1.9	Routine		10/25/2022	VA000006241	COMPLEMENTARY AM INTEGRATIVE HEALTH		VACCN TEST Facility		
	0	000000000	Eye Care Advanced Eye Treatment SEOC 1.2.10 PRCT	Routine		10/25/2022	VA000006238	OPHTHALMOLOGY	Sent	VACCN TEST Facility		

#### 3. Enter information in any field within the **Referral Search** screen.

#### Figure 6: Referral Search Screen

Find Referrals >	HSR	M - QA - MR7			Community :	taff
Referral Search						
Referral Number Unique Consult ID Network Treating Specialty Provider Name Service Requested Category of Care Community Provider/Facility	Q Q Q Q Q Q	Date Added From Date Added To Priority Source Of Referral * Status	Accepted X Sent X	Eirst Appointment Made X	Initial Care Given X	0 0 0 0
Autlipte Community Providers / Facilities		Multiple Optional Task(s)				
	HealthShare I	Referral Manager				
					Fin	d

- 4. Select the **Find** button. The resulting **Referral List** screen lists referrals that match the search criteria.
  - » Notes:
    - When the values are entered for more than one field, HSRM looks for records that match all fields. There is no "or" search available.
    - The search is not case sensitive (e.g., there is no difference between Smith, smith, and SMITH).
    - The search looks for numbers matching, or starting with, the values entered (e.g., entering 325 will return 325 000 but not 000 325).



# 4.1.4 Find Referral by Patient

Community providers can search for a referral using the **Find Referral by Patient** feature. Users will have the patient's last name, first name, and date of birth as required fields but can also refine their search using the patient's middle name, birth sex, Social Security Number (SSN), Integration Control Number (ICN), or Electronic Data Interchange Personal Identifier (EDIPI).

To access the Find Referral by Patient feature:

- 1. Access the menu by selecting the Menu  $\blacksquare$  icon.
- 2. Select Find Referral by Patient.

Figure	7:	Find	Referral	by	Patient
--------	----	------	----------	----	---------

-				HSRM - QA	- R21 MR	1 Adhoc 1					HSRM	
U.S. Department of Veterans Affairs	I								Sorted by Date Adde	ed 📄 Toggle M	lultiple Selection	;
Search	0	SSN 🗘	Service \$	Priority 🗘	Optional Task(s)		Referral Number	Category of Care 🗘	Status 🗘	Community Provider / Facility	C Appt C Date	
Find Referral by Patient Find Referrals	10	000000000	Pulmonary Function Testing SEOC 1.4.3	Routine		10/25/2022	VA000006243	PULMONARY	First Appointment Made	VACCN TEST Facility	10/27/2022	
Referral List Task List	0	000000000	Orthopedics General_PRCT SEOC 1.0.13	Routine		10/25/2022	VA000006239	ORTHOPEDIC	First Appointment Made	VACCN TEST Facility	12/01/2022	
> Reports > Tools	10	000000000	Cardiology Cath - PCI SEOC 1.1.11 PRCT REV	Routine		10/25/2022	VA000006235	CARDIOLOGY	First Appointment Made	VACCN TEST Facility	11/15/2022	
	10	000000000	Cardiology Comprehensive_PRCT SEOC 1.4.13	Routine		10/25/2022	VA0000006242	CARDIOLOGY	Sent	VACCN TEST Facility		
	10	000000000	Acupuncture Chronic Care Management SEOC 1.1.9	Routine		10/25/2022	VA000006241	COMPLEMENTARY AI		VACCN TEST Facility		
	10	000000000	Eye Care Advanced Eye Treatment SEOC 1.2.10 PRCT	Routine		10/25/2022	VA000006238	OPHTHALMOLOGY	Sent	VACCN TEST Facility		

3. Populate the required fields (i.e., Last Name, First Name, and Date of Birth) and any other optional fields (if known). Select the Find button to generate the search.

Figure 8: Patient Search Screen

E 🏫 Find Referral by Patient >	HSR	M - QA - R21 MR1 Adhoc 1	HSRM Training
Patient Search			
* Last Name	one	SSN	
* First Name	veteran	ICN	
Middle Name		EDIPI	
Birth Sex	۵,		
*Date of Birth	01/01/1900		
			Find

11



4. The resulting **Patient List** will show patients that match the search criteria. Select the row of the patient to view a Referral List for that specific patient.

Charles Charle	ent Search >			HSRM	QA - R21 MR1 Adho	s 1			🙎 HSRM Trainin
atient List								Sorted	by Last Name, First Nam
ast Name 🗘	First Name 🗘	Middle Name	Birth Sex 🗘	Date of Birth	Age	Address	City 🗘	State	ZIP Code
NE	Veteran		Male	01/01/1900	123 Yrs				
NE	Veteran		Male	01/01/1900	123 Yrs				

Figure 9: Patient List

#### 4.2 Manually Change the Status of a Referral

The referral status shows where a referral is in its lifecycle. As shown in **Figure 1**, the possible statuses are Approved, Sent, Accepted, Rejected, First Appointment Made, Initial Care Given, and EOC Complete. Community providers have access to all statuses except Approved and EOC Complete.

To manually update the status of a referral:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Navigate to the **Referral Details** screen by selecting the referral row.



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#### Figure 10: Referral Details Screen

E 🏫 Back to: Referral	List >	Heat	thShare Referral Manager -	- QA - R23.0.3.0		н	SRM Training
ONE, Veteran	DOB:	01/01/1900		Age: 123 Yrs		And R	
Referral Details							:
* Referring Facility	Togus VA Medical Center	* Provisional Diagnosis	S82012Q Displ osteochon	n fx i patella, 7t	Level of Care Coordination	Moderate	
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121	*Referral Date	09/06/2023			Add/View Documents	
Referring Facility Fax	Option 5 207-626-4780	Clinically Indicated Date	09/11/2023		Veteran's Medical Record		
*Referring Provider		*Referral Expiration Date	03/04/2024				
*Priority	Routine						
✓ Service/s Requested	1						
Category of Care		ORTHOPEDIC					
*Service Requested		Orthopedics General	REV_PRCT SEOC 1.0.15				
		SEOC Details					
This referral is only valid for	or the services authorized under this standardiz	red episode of care (SEOC). An ov	erview of services and number	er of visits authorize	ed for this SEOC can be viewed u	ising the "SEOC Details" link above.	
For additional billing and re	eferral information, please click the "Billing and	Other Referral Information" tab un	derneath the "Print" tab on th	he vertical ellipse ac	tion menu in the top right corner (	of this screen.	
If additional services are no	eeded, or for questions related to this referral,	please contact the referring VA fac	lity listed above.				
	rtment of Veterans Affairs (VA) is required by la HI). The Veterans Health Administration (VHA						
						Apply	Update

- 3. Navigate to the Referral Processing Information section on the Referral Details screen. Select the Status field and select the new status. Community providers can change the referral status to Accepted, Rejected, First Appointment Made (the status automatically changes to First Appointment Made when an initial appointment is recorded), or Initial Care Given, depending on where the referral is in its lifecycle.
  - » Note: If a user selects the Rejected status, the Referral Return Reason field will be mandatory. Additionally, the Referral Return Reason field is only editable when the user updates the status to Rejected.

∃ A Back to: Referra	I List >		Healt	hShare Referral Manager - QA - R23.0.3.0			HSRM Training
ONE, Veteran	1	DOB: 01/01	1/1900	Age: 123 Yrs		2mb u	
✓ Referral Processing	Information						*
Referral Number • Status Referral Return Reason Unique Consult ID • Network Extend/Continue Appointment Scheduling Efforts	VA0000006853 Accepted 534_7160 CC Network 1	Q Q	Source of Referral Comments	Interfaced from VA	Date Added Update Date Update Time Update User Update Facility Ordering Officer Assigned Workgroup Veteran Communication Preference C6 Referral	09/06/2023 09/26/2023 09:20 HSRM Training Togus VA Medical Center HSRM Training	
✓ Initial Community P	rovider/Facility Information						_
Treating Specialty	Dentist		*Community Provider / Facility Provider Location * Provider Name Affiliation	VACCN TEST Facility VACCN TEST Facility-156 WILLIAM ST VACCN TEST Facility CCN1	Allocated Date Appointment Date	09/26/2023 Provider Details	
						App	Update

Figure 11: Referral Details – Status Field



- 4. Enter any relevant comments regarding the referral in the **Comments** field of the **Referral Processing Information** section.
- 5. Select the **Update** button **update** to save changes and return to the previous screen. Select the **Apply** button **Apply** to save changes and stay on the same screen.
  - Note: The C6 Referral checkbox under the Referral Processing Information section pertains to referrals assigned to the Community Care Clinical Coordination Contact Center (C6). These user groups include C6 Supervisor, C6 Administrator, and C6 Clinical Staff. If the box is checked, the users in the C6 groups will be able to view and manage these referrals.

### 4.3 Access Standardized Episode of Care Information

A Standardized Episode of Care (SEOC) is a bundle of services authorized under a single referral. A SEOC includes all clinically related services for one patient for a discrete diagnostic condition within a specific period across a continuum of care. A SEOC helps reduce the need to seek individual authorization for each element of care. It includes all physician, inpatient, and outpatient care, as well as labs and diagnostics. Within HSRM, the user can view a list of services associated with the SEOC. This is the procedural overview of services.

To view SEOC details:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Select the row of the referral to navigate to the Referral Details screen.
- 3. Navigate to the **Service/s Requested** section on the **Referral Details** screen and select the **SEOC Details** link.
  - » Note: VA is required by law to obtain precertification and bill third-party payers (TPPs) for care that is not related to a Veteran's service or to obtain special authority for Veterans who have other health insurance (OHI). Users can find precertification information and instructions under the SEOC Details link and in the Offline Referral Form.



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#### Figure 12: Referral Details – SEOC Details

Back to: Referra	I List >	Healt	hShare Referral Manager - QA - R23.0.3.0		L HSRM TR	aining
ONE, Veteran	DOB: 01/0	01/1900	Age: 123 Yrs		400	
Referral Details						÷ ^
*Referring Facility	Togus VA Medical Center	*Provisional Diagnosis	S82012Q Displ osteochon fx I patella, 7t	Level of Care Coordination	Moderate	
Referring Facility Phone Referring Facility Fax	877-881-7618 or 207-623-8411 ext. 6121 Option 5 207-626-4780	* Referral Date Clinically Indicated Date	09/06/2023 09/11/2023	Veteran's Medical Record	Add/View Documents	
*Referring Provider *Priority	Routine	*Referral Expiration Date	03/04/2024			
✓ Service/s Requested	i					
Category of Care		ORTHOPEDIC Orthopedics General	REV PRCT SEOC 1.0.15			
This referral is only valid for	or the services authorized under this standardized	episode of care (SEOC). An ove	erview of services and number of visits authorize	ed for this SEOC can be viewed u	sing the "SEOC Details" link above.	
For additional billing and re	eferral information, please click the "Billing and Ott	her Referral Information" tab und	derneath the "Print" tab on the vertical ellipse ac	tion menu in the top right corner of	of this screen.	
If additional services are n	eeded, or for questions related to this referral, plea	ase contact the referring VA facil	lity listed above.			
	rtment of Veterans Affairs (VA) is required by law to OHI). The Veterans Health Administration (VHA) Of					er 👻
					Apply	pdate

#### 4. Review the **Procedural Overview** for the SEOC.

#### Figure 13: SEOC Details Screen

∃ A Back to: Referral Details >	Healt	thShare Referral Manager - QA - R22.0.2.1	HSRM Tr	aining
ONE, Veteran	DOB: 01/01/1900	Age: 123 Yrs	an' u	
Procedural Overview				^
Orthopedics General_PRCT SEOC 1.0.13	3			
Description:				- 1
Additional Information:				- 1
*Please visit the VHA Storefront www.va.gov/COMW * Pharmacy prescribing requirements • Durable Medical Equipment (DME), Prosthetics, ar * Precertification (PRCT) process requirements * Request for Services (RFS) requirements	UNITYCARE/providers/index.asp for additional resources and Orthotics prescribing requirements	s and requirements pertaining to the following:		
SEOC Service			Quantity Limit	
Initial outpatient evaluation, treatment and follow up	visits for the referred condition indicated on the consult or	rder	999	
Diagnostic imaging relevant to the referred condition	on the consult order		999	
Labs and pathology relevant to the referred condition	n on the consult order		999	
Diagnostic studies relevant to the referred condition	on the consult order including but not limited to: EMG/NC	S	999	
Anesthesia consultation related to the procedure or	surgery relevant to the referred condition on the consult o	rder	999	
Pre-procedure medical and basic cardiac clearance,	as indicated (including H+P/labs, EKG, CXR, echo) **I	Note: cardiac testing or evaluation outside of the above CXR, EKG and echo will require an RFS for a	999	

#### 4.4 Print the Offline Referral Form

Printing the **Offline Referral Form** enables community providers to retain a hard copy of the referral for their files. The **Offline Referral Form** contains referral details, additional referral information, billing and precertification information, patient details, and SEOC information. Community providers can print offline referral forms for individual or multiple referrals.

#### 4.4.1 Individual Referral

To print the **Offline Referral Form** for an individual referral:



- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Select the row of the referral to navigate to the **Referral Details** screen.
- 3. Select the **Component Menu** icon <sup>1</sup> (also called the Referral List component menu button by screen readers) from the Referral Details section, then select Offline Referral Form from the Print drop-down menu.

Figure 14: Component Menu – Offline Referral Form

Eack to: Referral List	2		HealthShare Referral Mana	ger - QA - R23.0.3.0			Referral Details
ONE, Veteran	DOB: 01/0	1/1900		Age: 123 Yrs			v Print
Referral Details							Offline Referral Form
*Referring Facility Referring Facility Phone Referring Facility Fax *Referring Provider *Priority	Topus VA Medical Center 877-885-7658 ar 207-422-8411 ext. 8121 Option 5 207-626-4780 Routine	*Provisional Diagnosis *Referral Date Clinically Indicated Date *Referral Expiration Date	S52812B Disp ft, of I uina s           10/25/2022           10/31/2022           05/01/2023	tyloid process, init for opn fx type V2	Level of Care Coordination	Moderate Add/View Doc	Billing and Other Referral Information V Options Record Appontment
✓ Service/s Requested							
Category of Care		ORTHOPEDIC					
* Service Requested		Orthopedics General_PRC1	SEOC 1.0 13				
		SEOC Datails					
This referral is only valid for the ser	rvices authorized under this standardized episode of care (SEOC). An over	view of services and number of visits author	zed for this SEOC can be viewed u	sing the "SEOC Details" link above.			
For additional billing and referral in	formation, please click the "Billing and Other Referral Information" tab und	erneath the "Print" tab on the vertical ellipse	action menu in the top right corner i	of this screen.			
If additional services are needed, o	or for questions related to this referral, please contact the referring VA facilit	y listed above.					
Standardized Episode Of Care (SE	f Veterans Affairs (VA) is required by law to obtain precertification and bill T EOC) referral you have accepted may include specific services that require EOC can be found at: https://www.va.gov/COMMUNITYCARE/providers/PF	Third Party Payer precertification. It is imper					
	VA Community Care Medical Policies describe standard VA health care be ditional services are requested. Community Care Medical Policies will be u						

#### 4. The **Offline Referral Form** appears, which users can print, download, and save.

Figure 15: Offline Referral Form

VA U.S. Department of Veterans Affairs	VA Form 10-7080 - Approved Referral For Medical Care
Veteran Name: One, Veteran	Referral Number: VA000006242
Veteran ICN: 1013173133V766967	Priority: Routine
Veteran EDIPI:	Referral Issue Date: 2022-10-25
Veteran Date of Birth: 1900-01-01	Expiration Date: PRELIMINARY 2023-04-23 (SEE BELOW)*
Veteran Preferred Name:	First Appointment Date: SUPPLY TO VA ASAP
Pronoun:	
Pronoun Description: Veteran Address:	
veteran Address:	
Veteran Phone Number:	
Veteran Mobile Phone Number (if Known):	
Veteran Business Phone Number (If Known):	
Veteran Email Address (If Known):	
Referring VA Facility: Togus VA Medical Center	
VA Telephone Number: 877-881-7618 or 207-623-8411 e	xt. 6121 Option 5
VA Fax Number: 207-626-4780	
Initial Community Care Provider/Facility: VACCN TEST	Facility
Initial Provider Location: VACCN TEST Facility-156 WILL	
Provider Name (if known): VACCN TEST Facility	· · · · · · · · · · · · · · · · · · ·
Community Provider NPI: 1205303591	
Caregiver Type:	

#### 4.4.2 Multiple Referrals

To generate an Offline Referral Form for multiple referrals:

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- - » Note: Users may generate an Offline Referral Form for multiple referrals from any referral list, including the Veteran's referral list.
- 2. Select the **Toggle Multiple Selections** checkbox **■** to enable the selection of multiple referrals (for screen readers, select the toggled multiple selection checkbox not checked; to select, press enter), then select the checkboxes next to the appropriate referrals (for screen readers, select the row button for each preferred referral).

≡ 🏫							HSRM - Q	A - MR7						Community S	itaff
Referra	l List												Toggle Multip	le Selection	:
> Re	ferrals														
	Referring Facility 🗘	Last Name 🗘	First Name 🗘	Date of Birth 🗘	SSN 🗘	Service 🗘	Priority 🗘	Optional Task(s)	Date Added 🗘	Referral Number 🗘	Category of Care 🗘	Status 🗘	Community Provider / Facility 🗘	Appt Date 🗘	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Comprehensive SEOC 1.4.10 PRCT	Routine		09/13/2021	VA0000005282	CARDIOLOGY	First Appointment Made	COMMUNITY MEDICAL CENTER	09/14/2021	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Radiology MRI - MRA SEOC 1.0.8 PRCT REV	Routine	~	09/13/2021	VA0000005281	RADIOLOGY MRI/MRA	First Appointment Made	COMMUNITY MEDICAL CENTER	06/24/2022	
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Comprehensive SEOC 1.4.9 PRCT	Routine		06/14/2021	VA000005064	CARDIOLOGY	Sent	COMMUNITY MEDICAL CENTER		
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Radiology MRI - MRA_REV_PRCT SEOC 1.0.7	Routine		06/14/2021	VA000005062	RADIOLOGY MRI/MRA	Sent	COMMUNITY MEDICAL CENTER		
	Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Hematology SEOC 1.0.8 PRCT	Routine		06/10/2021	VA000005034	HEMATOLOGY	Sent	COMMUNITY MEDICAL CENTER		

Figure 16: Referral List – Multiple Referrals

3. Select the **Component Menu** icon <sup>‡</sup> (also called Referral List component menu button by screen readers) and select **Selected Offline Referral Forms** from the **Email** drop-down menu.

Figure 17: Component Menu – Selected Offline Referral Forms

≣⋒			Health Share Referral Manager - Demo - R12.0.4.1								Ref	erral List
Referra	al List											
> R	ferrals										ř	Email
	Referring Facility 💲	Last Name 💲	First Name 🗘	Date of Birth 🗘	SSN 💲	Service 🗘	Prionty Option Task(s	al Date Added 🕽	Referral Number 🗘	Category of Care 🗘	L	Selected Offline Referral Forms
~	Lebanon VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Cath - PCI SEOC 1.0.6 PRCT REV	Routine	08/14/2020	VA0000000681	CARDIOLOGY TESTS, PROCEDURES, STUDIES		
	Lebanon VA Medical Center	ONE	Veteran	01/01/1900	000000000	Neurology SEOC 1.0 6 PRCT	Routine	08/14/2020	VA000000682	NEUROLOGY		
~	Lebanon VA Medical Center	ONE	Veteran	01/01/1900	000000000	Allergy and Immunology SEOC 1.0.3 PRCT	Routine	12/11/2019	VA000000237	ALLERGY AND IMMUNOLOGY		
	Batavia VA Medical Center	ONE	Veleran	01/01/1900	000000000	Acupuncture-Chronic Care Management SEOC 1.2.4	Routine	01/03/2020	VA000000264	ACUPUNCTURE		
	Lebanon VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Cath - PCI SEOC 1.1.7 PRCT REV	Routine	11/11/2020	VA000000753	CARDIOLOGY		
	Lebanon VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Cath - PCI SEOC 1.1.7 PRCT REV	Routine	11/11/2020	VA000000754	CARDIOLOGY		

4. The Offline Referral Form appears.



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Figure 18: Multiple Offline Referrals Form

	veteran A	pproved Refer	rais for medical	Care Cover Page	3
Veteran Name	Referral No	Referral Date	VA Facility	Category of Care	Community Provider/Facility
One, Veteran	VA000000237	2019-12-11	Lebanon VA Medical Center	ALLERGY AND IMMUNOLOGY	
One, Veteran	VA000000264	2020-01-03	Batavia VA Medio Center	aIACUPUNCTURE	
One, Veteran	VA000000681	2020-08-14	Lebanon VA Medical Center	CARDIOLOGY TESTS, PROCEDURES, STUDIES	
One, Veteran	VA000000682	2020-08-14	Lebanon VA Medical Center	NEUROLOGY	

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

#### 4.5 Manage Documents

HSRM allows VA and community providers to easily upload and download medical documents such as medical records and images. Prior to providing care to a Veteran, community providers can download and review documents that VA shares regarding the Veteran/patient. Following care, community providers upload relevant patient care documentation for VA's review. This eliminates faxing and emailing documentation and enhances the accuracy of patient documentation. HSRM accepts most file types, including JPG, BMP, PNG, Microsoft Office, and PDF. JPG and PDF files are displayed in the preview section. There are no limitations on file size.

#### 4.5.1 View and Download Documents

To view and download documents:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Navigate to the **Referral Details** screen by selecting the referral row.
- 3. Select Add/View Documents on the Referral Details screen to open the Documents screen. Here, users can view all documents that have been added to the referral.
  - » Note: Users may also view and download documents by accessing Documents from the Additional Referral Information screen. These instructions are in the View Additional Referral Information section of this guide.

#### 4.5.2 Add Documents

To add documents to a referral:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Navigate to the Referral Details screen by selecting the referral row.



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#### 3. Select Add/View Documents on the Referral Details screen to open the Documents screen.

*Figure 19: Referral Details – Add Documents to a Referral* 

∃  Back to: Referral	List >	Healt	HealthShare Referral Manager - QA - R23.0.3.0					
ONE, Veteran	D	DOB: 01/01/1900	Age: 123 Yrs	And The	•••			
Referral Details					÷ .			
* Referring Facility	Togus VA Medical Center	* Provisional Diagnosis	S82012Q Displ osteochon fx I patella, 7t	Level of Care Coordination Moderate				
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 61 Option 5		09/06/2023	Add/View Documents				
Referring Facility Fax	207-626-4780	Clinically Indicated Date *Referral Expiration Date	09/11/2023	Veteran's Medical Record				
*Referring Provider			00/04/2024					
* Priority	Routine							
✓ Service/s Requested	I							
Category of Care		ORTHOPEDIC						
*Service Requested		Orthopedics General_	REV_PRCT SEOC 1.0.15					
		SEOC Details						
This referral is only valid for	or the services authorized under this star	ndardized episode of care (SEOC). An ov	erview of services and number of visits authoriz	ted for this SEOC can be viewed using the "SEOC Details" link	above.			
, i i i i i i i i i i i i i i i i i i i				ction menu in the top right corner of this screen.				
	, , , , , , , , , , , , , , , , , , , ,	eferral, please contact the referring VA faci	,					
				a Veteran's Service Connection or Special Authority for Veter you have accepted may include specific services that require				
				٩	Apply Update			

- Select the New button on the Documents screen. The Add Document screen appears.
   Enter data in the corresponding fields on the Add Document screen.
  - » Note: The Date Created, Time Created, and User Created fields populate automatically and are read-only.

Figure 20: Add Document Screen

∃ A Back to: Documents >		HealthShare Referral Manager - QA - R23.0.3.0	HSRM Training
ONE, Veteran	DOB: 01/01/1900	Age: 123 Yrs	<u>'w</u> •••
Add Document			
Date Created	09/26/2023	Attach File	Drop a file here to attach it, or
Time Created	09:40		Upload Webcam
User Created	HSRM Training		
* Description			
* Document Type	Medical Documents	Q	
		HealthShare Referral Manager	
			Update

- 6. Select the **Upload** button use and select the file from the computer's hard drive.
- 7. To identify the type of document, select the **Magnifying Glass** icon <sup>(A)</sup> (also called document type lookup graphic by screen readers) in the **Document Type** field and choose



the appropriate type (e.g., **Medical Documents** or **Request for Services/SAR**). This will trigger an automatic task for VA to review the document.

- 8. Select the **Update** button at the bottom right of the screen to save and go back to the **Documents** screen.
- 9. Select **Referral Details** from the **Breadcrumb Trail** drop-down list to go back to the **Referral Details** screen or continue to add documents in the same manner.

# 4.6 Record an Appointment

Recording appointments in HSRM makes this information available to VA without having to phone, email, or fax, thus reducing the administrative burden for both VA and community providers. Users can record an appointment in the system from the **Referral Details** screen. Users must record a first appointment for every referral they accept. Recording any subsequent appointments in HSRM is optional.

» Note: Do not forget to book the appointment in your own external system.

To record an appointment:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Select the referral to navigate to the **Referral Details** screen.
- 3. Select the **Component Menu** icon <sup>‡</sup> (also called Referral List component menu button by screen readers) located in the Referral Details section to open the Component Menu.
- 4. Select Options and Record Appointment.

Figure 21: Referral Details – Record Appointment

Back to: Referra	il List >	Healt	hShare Referral Mana	ger - QA - R23.0.3.0		Referral Details
ONE, Veteran	DOB: 01	/01/1900		Age: 123 Yrs		✓ Print
Referral Details						Offline Referral Form
* Referring Facility	Togus VA Medical Center	*Provisional Diagnosis	S82012Q Displ osteo	chon fx i patella, 7t	Leve	Billing and Other Referral Information
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121	*Referral Date	09/06/2023			✓ Options
		Clinically Indicated Date	09/11/2023		Vete	Record Appointment
	207-626-4780	*Referral Expiration Date	03/04/2024			
5						
* Priority	Routine					
✓ Service/s Requested	d					
Category of Care		ORTHOPEDIC				
*Service Requested		Orthopedics General_	REV_PRCT SEOC 1.0.	15		
		SEOC Details				
This referral is only valid for	Details         ag Facility       Togus VA Medical Center       • Provisional Diagnosis       \$82012Q Displ osteochon fx   patelia, 7t         Facility Phone       877-881-7618 or 207-623-8411 ext. 6121 Option 5       • Provisional Diagnosis       \$82012Q Displ osteochon fx   patelia, 7t         Facility Fax       207-626-4780       • Referral Date       09/06/2023         ig Provider       Requested       03/04/2024       03/04/2024         of Care       ORTHOPEDIC       Orthopedics General_REV_PRCT SEOC 1.0.15         Requested       Orthopedics General_REV_PRCT SEOC 1.0.15       SECC Details					
For additional billing and r	eferral information, please click the "Billing and O	ther Referral Information" tab und	derneath the "Print" tab	on the vertical ellipse ac	tion menu	
If additional services are n	needed, or for questions related to this referral, ple	ase contact the referring VA facil	lity listed above.			
	ferral Details         eferring Facility       Togus VA Medical Center         eferring Facility       Togus VA Medical Center         ferring Facility       877-881-7618 or 207-623-8411 ext. 6121 Option 5         Option 5       Referral Date       09/06/2023         ferring Facility Fax       207-626-4780       08/11/2023         eferring Provider       03/04/2024       09/04/2024         eferring Provider       03/04/2024       03/04/2024         ervice/s Requested       08/THOPEDIC       03/04/2024         service Requested       ORTHOPEDIC       Orthopedics General_REV_PRCT SEOC 1.0.15         is referral is only valid for the services authorized under this standardized episode of care (SEOC). An overview of services and nur r additional billing and referral information, please click the "Billing and Other Referral Information" tab underneath the "Print" tab or additional billing and referral information is related to this referral, please contact the referring Vafacility listed above.         scentification: The Department of Veterans Affairs (VA) is required by law to obtain precertification and bill Third Party Payers for care					

5. Enter the appropriate information (e.g., **Service Requested**, **Appointment for**, **Date**, and **Time**). Additionally, if the referral is with a provider in CCNs 1 - 5, HSRM requires users to indicate whether the Veteran self-scheduled the appointment or requested the specific



appointment time. The mandatory question asks, "Did the Veteran self-schedule their appointment or independently request this specific appointment date?"

- » Notes:
  - HSRM marks mandatory fields with an asterisk (screen readers identify these fields as Star and Required).
  - The appointment date cannot be earlier than the referral date.

*Figure 22: Record Appointment Screen* 

⊟ 合 Back to: Referral Details >		HSRM - QA - R21 MR1 Adhoc 1	👱 HSRM Traini	ing
ONE, Veteran	DOB: 01/01/1900	Age: 123 Yrs	-	•••
Record Appointment				-
* Service Requested	C	Orthopedics General_PRCT SEOC 1.0.13	Q	
* Appointment for Scheduling Method			م م	
*Date		(EDT) America/New_York		U
*Did the Veteran self-schedule their appointment or in appointment date? * Treating Specialty		Dentist	۹	
		PMS Provider Search		
*Community Provider/Facility	V	/ACCN TEST Facility		
*Appointment Location	V	ACCN TEST Facility-156 WILLIAM ST ; FL 4, New York, NY, 10038-122300000X		
Provider Name	V	/ACCN TEST Facility		
Affiliation	С	CCN1		
Drive Time Appointment Type			Q	
Appointment Duration				
Appointment Reason				
Notes				I
			+≘	
			Upda	te

6. If the name of the specific facility caregiver is unknown or the appointment is with a facility caregiver other than the initial community provider, users may search for a community provider using the **Provider Profile Management System (PPMS) Provider Search**. This search component is described in the following section.

### 4.6.1 Locate a Provider Using the PPMS Provider Search

Users can find a list of providers and their details using the PPMS Provider Search feature. The PPMS Provider Search allows users to search by a provider's National Provider Identifier (NPI), state, zip code, and affiliation.

- » Note: The secondary provider must be in the same network as the current provider
- 1. On the Record Appointment screen, select the PPMS Provider Search link.



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*Figure 23: Record Appointment Screen – PPMS Provider Search* 

Eack to: Referral Details	HSRM - QA - R21 MR1 Adhoc 1	Line HSRM Training
ONE, Veteran DOB: 01/01/19	00 Age: 123 Yrs	(And) 
Record Appointment		
* Service Requested	Orthopedics General_PRCT SEOC 1.0.13	٩
* Appointment for		٩
Scheduling Method		م
* Date	Time (EDT)     America/New_York	
<sup>•</sup> Did the Veteran self-schedule their appointment or independently request this specific appointment date?		٩
* Treating Specialty	Dentist	
	PPMS Provider Search	
Community Provider/Facility	VACCN TEST Facility	
*Appointment Location	VACCN TEST Facility-156 WILLIAM ST ; FL 4, New York, NY, 10038-122300000X	
Provider Name	VACCN TEST Facility	
Affiliation	CCN1	
Drive Time Appointment Type		م
Appointment Duration		
Appointment Reason		
Notes		
		+2
		Undate

- Enter the provider's NPI in the NPI field. The State, Zip Code, and Affiliation fields may also be used to narrow the search results. When a zip code is entered into the Zip Code field, the State field will automatically populate.
- 3. Select the **Find** button to connect directly to **PPMS** to find the provider with the designated NPI.

Figure 24: PPMS Provider Search Screen – NPI Search

Eack to: Record Appointment		HSRM - QA	- R21 MR1 Adhoc 1		👱 HSRM	Training
ONE, Veteran	DOB: 01/01/1900		Age: 123 Yrs		<u>[]</u>	
PPMS Provider Search						_
To find a provider, enter a valid NPI						
*NPI						
State		Q				
Zip Code		Q				
Affiliation		Q				
Specialty	Care Provider	Affiliation	Phone	Care Site	Address	
						Find

4. **Select** the appropriate provider.



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Figure 25: PPMS Provider Search Screen – NPI Search Results
---

≡ 🏫 Back to: Re	ferral Details >				н	ealth Share R	eferral Manager - QA - R22.0.2.1				HSRM Tr	aining
ONE, Veteran			DOB:	01/01/1900			Age: 123 Yrs				1.000 10	
PPMS Provider Sear	ch											
To find a provider, ent	er a valid NPI											
*NPI		1013010917										
State						Q						
Zip Code						Q						
Affiliation						Q						
Records found: 3 (1s)												
Specialty	Care Provider	Affiliation	Phone	Care Site			Address	Provider NPI	High Performing Provider	At Home Service	Completed Community Provider Training	
General Acute Care Hospital	Community Medical Center Inc.	CCN1										
General Acute Care Hospital	Community Medical Center Inc.	TriWest - Choice										
General Acute Care Hospital	Community Medical Center Inc.	TriWest - Choice										
					Hei	althShare Re	ferral Manager					
												Find

#### Figure 26: Record Appointment Screen

Eack to: Referral Details		HealthShare Referral Manager - QA - R23.0.3.0									
ONE, Veteran	DOB: 01/01/1900	)			Age: 123 Yrs						
Record Appointment							-				
*Service Requested		Orthopedics General	PRCT SI	EOC 1.0.1	3	Q					
* Appointment for		Initial outpatient evalu	uation, tre	atment and	follow up visits for the referred condition indicated on the consult order-ORTHOPEDIC-1.0.13	Q	1				
Scheduling Method		Scheduled by Comm	unity Prov	ider		Q					
*Date		09/15/2023	* Time	09:00	(EST) America/New_York						
* Did the Veteran self-schedule their appointment or indep this specific appointment date?	eran self-schedule their appointment or independently request			Yes							
* Treating Specialty		General Acute Care H	Hospital								
		PPMS Provider Search	h								
* Community Provider/Facility		COMMUNITY MEDIC	AL CENT	ER			1				
*Appointment Location		COMMUNITY MEDIC	AL CENT	ER.							
Provider Name		Community Medical C	Center Inc								
Affiliation		CCN1									
Drive Time Appointment Type						Q					
Appointment Duration											
Appointment Reason							•				
						Linda	ate				

- » Note: Scheduling Method, Appointment Type, Appointment Duration, Appointment Reason, and Notes fields are optional. However, entering information in these fields is a best practice, as it ensures that VA and the community provider have access to all relevant appointment information in a central location.
- 5. Select the **Update** button is on the **Record Appointment** screen to save the appointment information. The **Referral Details** screen appears, and the status of the referral will automatically change to **First Appointment Made**.

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- » Note: If there is an appointment recorded for a provider other than the initial community provider, that second provider will not see the referral on their Referral List but will instead receive a task on their facility's task list that will allow them to work with the referral.
- » Note: The first appointment made in the SEOC will be on the Referral List for the duration of the referral, regardless of subsequent appointments that are scheduled and occur. The date of the first appointment made also displays in the Appointment Date field in the Initial Community Provider/Facility Information section on the Referral Details screen.

#### 4.7 Update the Status of an Appointment

To cancel an appointment:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Select the **Action Menu** icon ••• (also called link Referral List action menu by screen readers) located in the Patient Banner on the **Referral Details** screen and select **Additional Referral Information**.
  - » Note: The Action Menu icon ••• is also available from the end of the referral row on the Referral List.

Figure 27: Action Menu – Additional Referral Information

E Sack to Referra List >						Add Task	
ONE Veteran	DOB: 01/01/190	0		Age: 124 Yrs		Patient Details	
Referral Details						Additional Referral Information	
						Record Contact	
*Referring Facility	Tegas VA Medical Center	*Provisional Diagnosis		lyloid process, init for opin fx type 1/2	Level of Care Coordination	Requests for Services	
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121 Option 5	*Referral Date	10/25/2022		Α	4	
Referring Facility Fax	207-626-4780	Clinically Indicated Date	10/31/2022		Veteran's Medical Record		
*Referring Provider		*Referral Expiration Date	05/01/2023				
* Priority	Routine						
<ul> <li>Service/s Requested</li> </ul>							
Category of Care		ORTHOPEDIC					
* Service Requested		Orthopedics General_PRCT	I SEOC 1.0.13				
		SEOC Details					
This referral is only valid for the servi	es authorized under this standardized episode of care (SEOC). An overview of set	vices and number of visits authorized for	r this SEOC can be viewed using the	"SEOC Details" link above.			
For additional billing and referral info	mation, please click the "Billing and Other Referral Information" tab underneath the	"Print" tab on the vertical ellipse action i	menu in the top right comer of this sc	reen.			
If additional services are needed, or f	or questions related to this referral, please contact the referring VA facility listed ab	ove.					
Care (SEOC) referral you have accept	sterans Affairs (VA) is required by law to obtain precentification and bill Third Party ted may include specific services that require Third Party Payer precentification. It NITY/CARE/providers/PRCT_requirements.asp						
	Community Care Medical Policies describe standard VA health care benefits for s requested, Community Care Medical Policies will be used to determine approval b					c	
Please refer to the Billing and Other I	telerral Information tab for details on the precertification requirements related to thi	s approved relemal and Veteran.					
	rements: ** Must follow the VA National Protocol and clinical guidance for Esketan ch Tool available here: https://www.pbm.va.gov/apps/VANationalFormulary/	ine or Ketamine administration. Ketamin	ne treatments for mental health or for	pain are not approved under a CCN referral. F	Prior to administration it is required the ordering and		
and the second second second second second second	In roor available riefe, maps //www.joon.va.gov/apps/va/valionair/ormshary/ felines and complete the required Opicid Safety Training found here: https://www.v	a and COMMUNITY CARE involved on (EP)	II Training asn			2	
maximum and the optical canady con-	nerice and compares the requires option carry maning could rate independently	agencomment i conceptorion acco	C. Thereighter				
<ul> <li>Authority</li> </ul>							
* Program Authority	Authorized Pre-authorized VA Referral (not otherwise	specified) - 1703					
<ul> <li>Insurance Details</li> </ul>							
VA Payer Status	VA - Primary Payer						
<ul> <li>Referral Processing Information</li> </ul>	n						

3. Locate the appointment from the **Appointments** section and select the **Status** link. The **Appointment Change Status** screen appears.



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E 🏫 Back t	o: Referral Details	>						HSRM - QA - R21 M	IR1 Adhoc 1							HSRM Tra	inin
NE, Veteran			DOB: 01/01/1900						Age:	123 Yrs					1.44A		••
<ul> <li>Contacts</li> </ul>																	_
Referral Number	ţ		Co	ontact Da	ate	Contact Meth	od		Contac	t Outcor	ne		Co	ontact Details			
<ul> <li>Appointm</li> </ul>	ents													So So	rted by Date,	Treating Specia	ity
Referral Number	Community Provider / Facility	Date 🗘	Time	Time Zone Code	Appointment for	Treating Specialty	\$	Appointment Location	Provider Name or Location	Drive Time	Affiliation	Appointment Type	Scheduling Method	Status 🗘	Notes	Reason for Cancellation	
/A000006239	VACCN TEST Facility	12/01/2022	10:00		Initial outpatient evaluation, treatment and follow up visits for the referred condition indicated on the consult order- ORTHOPEDIC-1.0.13	Dentist		VACCN TEST Facility- 156 WILLIAM ST ; FL 4, New York, NY, 10038-122300000X			CCN1	Outpatient		Cancelled		Cancelled b Community Provider	
A000006239	VACCN TEST Facility	11/30/2022	09:00		Initial outpatient evaluation, treatment and follow up visits for the referred condition indicated on the consult order- ORTHOPEDIC-1.0.13	Dentist		VACCN TEST Facility- 156 WILLIAM ST ; FL 4, New York, NY, 10038-122300000X			CCN1	Outpatient		Cancelled		Reschedule by Patient	d
A0000006235	VACCN TEST Facility	11/15/2022	14:00		1. Initial outpatient evaluation, treatment and follow up visits for the referred condition indicated on the consult order- CARDIOLOGY-1.1.11	Dentist		VACCN TEST Facility- 156 WILLIAM ST ; FL 4, New York, NY, 10038-122300000X			CCN1	Outpatient		Booked			

- » Note: Users can also access the Change Status screen by selecting the Appointment For link located on the referral row and then selecting Change Status, located beneath the Appointment Status field.
- 4. The **Change Status To** field automatically populates as **Cancelled**. If selecting a different status, select the **Magnifying Glass** icon <sup>(A)</sup> (also called change status to lookup graphic by screen readers) in the **Change Status To** field and select a status from the drop-down list.
  - » Note: If a user selects No Show, they must also populate the Reason for No Show field.
- 5. Select the **Magnifying Glass** icon (also called reason for cancellation lookup graphic by screen readers) in the **Reason for Cancellation** field and select the appropriate reason for cancellation.
  - » Note: Users must choose from one of the available reasons when cancelling:
    - Cancelled by Community Provider
    - Cancelled by Patient
    - Cancelled by VA Staff
    - Rescheduled by Community Provider
    - Rescheduled by Patient
    - Rescheduled by VA Staff
- 6. Enter any additional information regarding the appointment cancellation.
  - » Note: Users can also use the Free Text for Cancellation field for additional details regarding the appointment (e.g., spoke to Veteran's family member to cancel the appointment).



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Figure 29: Appointment Change Status Screen

E 🏫 Back to: Additional Referral Information >		HSRM - QA - R21 MR1 Adhoc 1	L HSRM Traini
ONE, Veteran	DOB: 01/01/1900	Age: 123 Yrs	·
Appointment Change Status			
Change Status To	Cancelled		c
* Reason for Cancellation			c
Free Text Reason for Cancellation			
Cancel Date	03/17/2023	<b>m</b>	
Cancel Time	10:37		
Reason for No Show			
			Updat

- 7. Select the **Update** button to save changes.
- 8. The appointment status now displays as **Cancelled**. Once a user changes the appointment status to **Cancelled** or **Completed**, the appointment is no longer editable.

Figure 30: Additional Referral Information Screen

E 🏫 Back t	o: Referral Details	>						HSRM - QA - R21	M	R1 Adhoc 1							👱 HSRM Tra	ining
ONE, Veteran					DOB: 01/01/1900					Age: 12	23 Yrs					<u> 546</u> 11		
<ul> <li>Contacts</li> </ul>									_									
Referral Number	·		Co	ntact Da	ite	Contact Meth	od			Contact	Outcom	10		C	ontact Details			
<ul> <li>Appointm</li> </ul>	ents														Sort	ed by Date,	Treating Specia	ty
Referral Number	Community Provider / Facility	Date 🗘	Time	Time Zone Code	Appointment for	Treating Specialty	\$	Appointment Location	\$	Provider Name or Location	Drive Time	Affiliation	Appointment Sch Type Met	eduling	Status 🗘	Notes	Reason for Cancellation	1
/A000006239	VACCN TEST Facility	12/01/2022	10:00		Initial outpatient evaluation, treatment and follow up visits for the referred condition indicated on the consult order- ORTHOPEDIC-1.0.13	Dentist		VACCN TEST Facility 156 WILLIAM ST ; FL 4, New York, NY, 10038-122300000X				CCN1	Outpatient		Cancelled		Cancelled b Community Provider	<u>,</u>
/A000006239	VACCN TEST Facility	11/30/2022	09:00		Initial outpatient evaluation, treatment and follow up visits for the referred condition indicated on the consult order- ORTHOPEDIC-1.0.13	Dentist		VACCN TEST Facility 156 WILLIAM ST ; FL 4, New York, NY, 10038-122300000X				CCN1	Outpatient		Cancelled		Reschedule by Patient	ţ
/A000006235	VACCN TEST Facility	11/15/2022	14:00		1. Initial outpatient evaluation, treatment and follow up visits for the referred condition indicated on the consult order- CARDIOLOGY-1.1.11	Dentist		VACCN TEST Facility 156 WILLIAM ST ; FL 4, New York, NY, 10038-122300000X				CCN1	Outpatient		Cancelled	]	Cancelled b Patient	í
/A000006246	VACCN TEST Facility	11/08/2022	<mark>15:00</mark>		1. Initial outpatient evaluation, treatment and follow up visits for the	Dentist		VACCN TEST Facility 156 WILLIAM ST ; FL 4, New York, NY,				CCN1	Outpatient		Cancelled		Cancelled b Patient	y

#### 4.8 Record Contact

HSRM enables users to record any contact made with the Veteran, a community provider, or any other person or organization regarding the referral. Anyone with access to the referral can view this information.



» Note: The Veteran's preferred method of communication appears in a read-only field in the Referral Processing Information section of the Referral Details screen. When reaching out to a Veteran, community providers should view this field first.

To record contact about a referral:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Select the referral from the **Referral List**.
- 3. Select the **Action Menu** icon \*\*\* (also called link Referral List action menu by screen readers) on the **Patient Banner**.
- 4. Select Record Contact from the drop-down menu. The Record Contact screen appears.

*Figure 31: Action Menu – Record Contact* 

E 🔒 Back to: Referral List					
ONE. Veteran	 DOB: 01/01/190	Ē.		Age: 124 Yrs	
Referral Details					
* Referring Facility	Toous VA Medical Center	* Provisional Diagnosis	0535130 Den & al 1	uina styloid process, init for opn fx type I/2	Level of Care Coordination
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121 Option 5	*Referral Date	10/25/2022	und stylute process, and for operior type or	Early of Carls Conversion
Referring Facility Fax	8/7-881-7518 of 207-023-8411 etc. 6121 Uption 5 207-626-4780	Clinically Indicated Date			Veterari's Medical Record
*Referring Provider	-	*Referral Expiration Date	05/01/2023		
* Priority	Routine				
<ul> <li>Service/s Requested</li> </ul>					
Category of Care		ORTHOPEDIC			
* Service Requested		Orthopedics General_PRCT	( SEOC 1.0.13		
		SEOC Details			
If additional services are needed, c Precertification. The Department o Care (BECC) referral you have an bound at: https://www.res.gov/CMM Community Care Medical Policies: criteria When additional services a Prease refer to the Billing and Othe Drug Satify and Administration Re found through the VA Formulary Se	Internation, sease click he "Utiling and ONE- Referent Information" that underward her the capacitors stretch for interlenzi, pieces carbon environing VAA-back (bits bits data VAAssense ARIAN (VA) is sequenced by two is obtain presentifications and bit There Parky (Community, Care Marcial Parkies and Community, Care Marcial ARIATIVAAEED Parkies and Care Parkies and the week to determine approval to community, Care Marcial Parkies and community and another the rate rest execution. Community Care Marcial Parkies and the week to determine approval and there is an another than the strength of the strength of the strength of the rest execution. Community Care Marcial Parkies and the week to determine approval and the strength of the strength of the strength of the strength of the strength and the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of	ve. ayers for care that is not related to a Ve imperative that you notify the VeI if you notes and procedures that community a clinical eviewer. Community Care M approved referral and Veteran. ne or Katamine administration. Ketamin	steran's Service Connection or i have scheduled any of these providers may recommend as ledical Policies and supporting ne treatments for mental health	Special Authority for Wearans that have Other Health specific services for a Veteran that has CH4, so that VP necessary for a Veteran. Pitor to providing care, provid information can be found at: https://www.va.gov/COM4	can notify the Third Party Payer. Notification es should use the Community Care Medical I UNITYCARE/providers/Medical-Policy.asp
* Program Authority	Authorized/Pre-authorized VA Referral (not otherwise	specified) - 1703			
<ul> <li>Insurance Details</li> </ul>					
VA Payer Status	VA- Primary Payer				
<ul> <li>Referral Processing Information</li> </ul>	tion				

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



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#### Figure 32: Record Contact – Record Contact Screen

ONE Veferan DBE: 01011000     Record Contact <ul> <li>Contact</li> <li>Contact Meriod</li> <li>Contact Users</li> <li>Contact Time</li> <li>Contact Status</li> <li>Completed</li> <li>Contact Details</li> </ul> Contact Details	∃ A Back to: Referral Details >		HSRM - QA - R21 MR1 Adhoc 1		<b>.</b>	ISRM Training
v Contact       Referal Number     VA000005241     Indirect Time (mins)       * Contact Method     Binase     Q       * Contact Date     03/17/2023     Update User       Contact Time     11:00     VACCN TEST Facility	ONE, Veteran	DOB: 01/01/1900	Age: 123 Yrs		Part II	
Referral Number     VA000006241     Indirect Time (mins)       *Contact Method     Image     Q       Interpreting Time (mins)     Interpreting Time (mins)       *Contact Date     03/17/2023     Update User       Contact Time     1100     VACCN TEST Facility       *Contact Status     Completed     Q       Contact Outcome     Q     VACCN TEST Facility	Record Contact					
* Contact Method     Monie     Q     Interpreting Time (mins)       * Contact Date     03/17/2023     Update User Update User Update User Facility     VACCN TEST Facility       * Contact Time     11.00     Q     VACCN TEST Facility       * Contact Status     Completed     Q       * Contact Outcome     Q     VACCN TEST Facility	✓ Contact					
	* Contact Method * Contact Date Contact Time * Contact Status	Phone 03/17/2023	Q Interpreting Time (mins) Update User Update User Facility Q	VACCN TEST Facility		
	Contact Details					+=
						-

#### 4.9 View Additional Referral Information

Users can view additional information about a referral on the Additional Referral Information screen. This screen displays contacts, appointments, referral documents, care coordination documents, referral consult factors, referral notes, and patient letters.

To view additional referral information:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Select the **Action Menu** icon ••• (also called link Referral List action menu by screen readers) next to the corresponding referral row and select Additional Referral Information.
  - » Note: The Action Menu icon ••• (also called link Referral List action menu by screen readers) is also available from the Referral Details screen in the Patient Banner.



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*Figure 33: Referral List – Additional Referral Information* 

Back to: Referral List >					
ONE, Veteran	DOR: 01	01/1900		Age: 124 Yrs	
Referral Details					
*Referring Facility	Togus VA Medical Center	* Provisional Diagnosis		id process, init for opn fx type 1/2	Level of Care Coordination
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121 Option 5	*Referral Date	10/25/2022		
Referring Facility Fax *Referring Provider	207-626-4780	Clinically Indicated Date	10/31/2022		Veteran's Medical Record
* Priority	Routine	*Referral Expiration Date	05/01/2023		
PDARY	Routine				
<ul> <li>Service's Requested</li> </ul>					
Category of Care		ORTHOPEDIC			
* Service Requested		Orthopedics General_PRC1	T SEOC 1.0.13		
		SEOC Details			
	ces authorized under this standardized episode of care (SEOC). An overvie mation, piease click the "Billing and Other Referral Information" tab undern				
	for questions related to this referral, please contact the referring VA facility is		ment in the top oper conner or one pure		
Precertification: The Department of V Care (SEOC) referral you have acce	Interans Affairs (VA) is required by law to obtain precertification and bill Thin pred may include specific services that require Third Party Payer precertification .NITYCARE/providers/PRCT_requirements.asp	Party Payers for care that is not related to a W			
	A Community Care Medical Policies describe standard VA health care bene requested, Community Care Medical Policies will be used to determine ap				
Please refer to the Billing and Other	Referral Information tab for details on the precertification requirements relat	ed to this approved referral and Veteran.			
	arements; ** Must follow the VA National Protocol and clinical guidance for 6 rch Tool available here: https://www.pbm.va.gov/apps/VANationalFormulary.		ne treatments for mental health or for pair	n are not approved under a CCN referral. Pri	or to administration it is required the ordering a
Must follow the VA Opioid Safety Gu	delines and complete the required Opioid Safety Training found here. https://	www.va.gov/COMMUNITYCARE/providers/ED	0U_Training.asp		
~ Authority					
* Program Authority	Authorized/Pre-authorized VA Referral (not of	herwise specified) - 1703			
<ul> <li>Insurance Details</li> </ul>					
VA Payer Status	VA - Primary Payer				
<ul> <li>Referral Processing Informati</li> </ul>	on				

3. The **Additional Referral Information** screen appears, showing contacts, appointments, referral documents, care coordination documents, referral consult factors, referral notes, and patient letters related to the referral. Select each to view the corresponding information.

Figure 34: Additional Referral Information

DOB: 01/01/1900 ate Contact Method	Age: 123 Yrs Contact Outcom	re Contact Details
ate Contact Method	Contact Outcom	
ate Contact Method	Contact Outcom	
		Sorted by Date Treating Special
		- · · · · · · · · · · · · · · · · · · ·
		Sorted by Date, Tim

» Note: Users can sort each list using the column header and advanced sorting methods.

#### 4.10 Working with Tasks

A task in HSRM represents a discrete action that users must complete for a Veteran's referral. Tasks minimize administrative burdens and streamline communications. They enable VA and community providers to share information without having to pick up the phone. Automatic tasks serve as reminders for submitting medical documents and precertification information, minimizing potential delays in payment.

For example, a community provider will receive an auto-generated task from VA to submit medical documentation seven days after the referral status is changed to **Initial Care Given**.



Alternatively, the community provider can create a manual task to communicate with VA (e.g., to request VA to contact the Veteran or to provide additional referral documents).

#### 4.10.1 Create a Task

To manually create a task:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Select the **Action Menu** icon ••• (also called link Referral List action menu by screen readers) next to the corresponding referral row, then select **Add Task**.
  - » Note: The Action Menu icon ••• (also called link Referral List action menu by screen readers) is also available from the Referral Details screen in the Patient Banner.

Figure 35: Action Menu – Add Task

Back to: Referral List						Add Task	
ONE, Veteran	DOB	01/01/1900		Age: 124 Yrs		Patient Details	
Referral Details						Additional Referral Information	
						Record Contact	
* Referring Facility	Togus VA.Medical Center	* Provisional Diagnosis		yloid process, init for opn fx type I/2	Level of Care Coordination	Requests for Services	
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121 Option 5	* Referral Date	10/25/2022		A		
Referring Facility Fax * Referring Provider	207-626-4780	Clinically Indicated Date	10/31/2022		Veteran's Medical Record		
* Priority	Rodine	*Referral Expiration Date	05/01/2023				
Priority	Moutine						
<ul> <li>Service's Requested</li> </ul>							
Category of Care		ORTHOPEDIC					
* Service Requested		Orthopedics General_PRC1	F SEOC 1.0.13				
		SEOC Details					
This solution is such a valid for the su	vices authorized under this standardized episode of care (SEOC). An ov		a Bin Of CC and by classed uping Bin 1	100 000 Patients' hale above			
	formation, please click the "Billing and Other Referral Information" tab un						
	r for questions related to this referral, please contact the referring VA faci		there at any top right contractor are and				
Care (SEOC) referral you have acc	Veterans Affairs (VA) is required by law to obtain precettification and bill extend may include specific services that require Third Party Payer precet /UNITYCARE/providers/PRCT_requirements asp.						
	VA Community Care Medical Policies describe standard VA health care b re requested. Community Care Medical Policies will be used to determine						
Please refer to the Billing and Othe	r Referral Information tab for details on the precertification requirements	elated to this approved refertal and Veteran.					
	guirements. ** Must follow the VA National Protocol and clinical guidance arch Tool available here: https://www.pbm.va.gov/apps/VANationalForms		ne treatments for mental health or for p	aain are not approved under a CCN referral	Prior to administration it is required the ordering and		
Must follow the VA Oploid Safety G	uidelines and complete the required Opioid Safety Training found here: h	ttps://www.va.gov/COMMUNITYCARE/providers/ED	IU_Training.asp				
~ Authority							
Program Authority	Authorized/Pre-authorized VA Referral (n	of otherwise specified) - 1703					
<ul> <li>Insurance Details</li> </ul>							
VA Payer Status	VA - Primary Payer						

- 3. The Task Edit screen appears.
- 4. Enter the appropriate information (e.g., **Task Item**, **Priority**, **Status**, **Comments**) to create the task. **Task Item**, **Priority**, **Status**, **Due Date**, and **Start Date** fields are mandatory (as denoted by the red asterisk) and users can edit them. Screen readers identify these fields as **Star** and **Required**.



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#### Figure 36: Task Edit Screen

Task Edit							
* Task Item	Message from Community to VA	Q	Due Date	05/24/2022	ä		
* Priority	Urgent	Q	* Start Date	05/24/2022	ίΰ.		
* Status	Pending	Q					
Assign Task to User		Q					
Assigned To User Assign Task to Group		Q					
Assigned Facility	Batavia VA Medical Center	Q					
Comments							
Need additional treatment notes							
							+≞
	He	althShare	Referral Manager				
						Accept Task	Update

- 5. Select the **Magnifying Glass** icon <sup>(A)</sup> (also called lookup graphic by screen readers) within each field to view and select available options.
- 6. Select the **Update** button update information.

#### 4.10.2 View or Edit a Task

The **Task List** displays all task items for the facility. From the **Task List**, users can review and edit an item.

To view the Task List:

1. Select the **Menu** icon  $\equiv$  (also called link menu for screen readers) and select **Task List** from the drop-down options.

				HSRM - QA	- R21 MR*	Adhoc 1					🖪 HSRM	Trainin
U.S. Department of Veterans Affairs									Sorted by Date Adde	d Toggle I	Multiple Selection	:
2, Search	0	SSN \$	Service 🗘	Priority 🗘	Optional Task(s)		Referral Number	Category of Care 🗘	Status 🗘	Community Provider / Facility	C Appt C Date	
Find Referral by Patient Find Referrals	0	000000000	Pulmonary Function Testing SEOC 1.4.3	Routine		10/25/2022	VA0000006243	PULMONARY	First Appointment Made	VACCN TEST Facility	10/27/2022	
Referral List Task List	10	000000000	Orthopedics General_PRCT SEOC 1.0.13	Routine		10/25/2022	VA000006239	ORTHOPEDIC	First Appointment Made	VACCN TEST Facility	12/01/2022	
> Reports > Tools	0	000000000	Cardiology Cath - PCI SEOC 1.1.11 PRCT REV	Routine		10/25/2022	VA0000006235	CARDIOLOGY	First Appointment Made	VACCN TEST Facility	11/15/2022	
	0	000000000	Cardiology Comprehensive_PRCT SEOC 1.4.13	Routine		10/25/2022	VA0000006242	CARDIOLOGY	Sent	VACCN TEST Facility		
	10	000000000	Acupuncture Chronic Care Management SEOC 1.1.9	Routine		10/25/2022	VA000006241	COMPLEMENTARY A INTEGRATIVE HEALT		VACCN TEST Facility		
	10	000000000	Eye Care Advanced Eye Treatment SEOC 1.2.10 PRCT	Routine		10/25/2022	VA000006238	OPHTHALMOLOGY	Sent	VACCN TEST Facility		

Figure 37: Menu – Task List



2. Locate the task on the **Task List**. Users can sort the Task List in the same way that they would sort the Referral List, by selecting the column headings or by sorting tasks with the Advanced Sort hyperlink.

Users can also filter their Task List to locate specific tasks. There are several filtering criteria, including Task Item, Date To/From, Last Name Start/End, Category of Care, Assigned User, Assigned Group, Assigned Facility, and more.

To filter the Task List:

1. Select the arrow icon  $\geq$  at the top of the **Task List** to open the filtering options.

Figure 38: Task List Header Row

Task L	.ist >					HSRM - QA - R	21 MR1 Adhoc 1						👱 HSRM Training
ask List												2	Sorted by Start Date
> Task List													
Start Date	Due Date 🗘	Referral Number	Task 🗘	Task Status	Priority Assigned User	Assigned Group	Assigned Facility	Category of Care 🗘	Last Name	First Name	Birth Sex Date of Birth	Completed	Comments
03/16/2023	03/17/2023	VA000005281	Message from VA to Community	Pending	Basic		VACCN TEST Facility	RADIOLOGY MRI/MRA	ONE	Veteran	Male 01/01/1900		Please upload treatm
03/16/2023	03/17/2023	VA000006243	Contact Patient, VA request to Community	Pending	Basic		VACCN TEST Facility	PULMONARY	ONE	Veteran	Male 01/01/1900		Please contact veter
03/16/2023	03/16/2023	VA000005281	Add Documentation, VA request to Community	Pending	Basic		VACCN TEST Facility	RADIOLOGY MRI/MRA	ONE	Veteran	Male 01/01/1900		Please add documents
03/16/2023	03/16/2023	VA000006238	Submit Medical Documents to VA	Pending	Basic		VACCN TEST Facility	OPHTHALMOLOGY	ONE	Veteran	Male 01/01/1900		Please add medica d
03/16/2023	03/21/2023	VA000006241	Submit Medical Documents to VA	Pending	Basic		VACCN TEST Facility	COMPLEMENTARY AND INTEGRATIVE HEALTH	ONE	Veteran	Male 01/01/1900		Please add medica d

#### 2. Enter the desired filtering criteria.

Figure 39: Task List Filters

Task L	ist >					н	ISRM - Q/	A - R21	MR1 Adhoc 1						l.	🖳 HSRM Traini
ask List															Sort	ed by Start Date
✓ Task List																
ask Item			Q	Date	From		12/06/	2022	<b>m</b>					Preferences		
eferral Number	r i			Date	То				曲		Lock					
ast Name Start				Prior	ty					Q						
ast Name End				Assi	ned Group					Q						
sk Status			0	Work	Group					Q						
		Pending X		Assig	ined User					Q						
ategory of Care	e		Q													
Start		Referral		Tack		Assigned	Accir	hone	Assigned			Last	First	Birth Sex		
Date ~	Due Date 🗘	Number	Task 🗘	Task Status	Priority 🗘	User	Grou	p `	Assigned Facility	Category of Care :	>	Name 2	Name	Date of Birth	Completed	Comments
03/16/2023	03/17/2023	VA000005281	Message from VA to Community	Pending	Basic				VACCN TEST Facility	RADIOLOGY MRI	MRA	ONE	Veteran	Male 01/01/1900		Please upload treatm
03/16/2023	03/17/2023	VA000006243	Contact Patient, VA request to Community	Pending	Basic				VACCN TEST Facility	PULMONARY		ONE	Veteran	Male 01/01/1900		Please contact veter
03/16/2023	03/16/2023	VA000005281	Add Documentation, VA request to Community	Pending	Basic				VACCN TEST Facility	RADIOLOGY MRI	MRA	ONE	Veteran	Male 01/01/1900		Please add documents

3. Select the **Find** button <sup>(68)</sup> to filter the **Task List** by the chosen criteria.

To view and edit a task:



- 1. Select the task title in the **Task** column to navigate to the **Task Edit** screen (data in the **Task** and **Last Name** columns are displayed as hyperlinks). The **Task Edit** screen appears.
  - » Note: Overdue tasks have a red indicator in the Due Date column (screen readers read the date to indicate overdue tasks).

Task List 🕥					HSRM - QA - R21	MR1 Adhoc 1							2	HSRM Trainin
Task List													Sor Sor	ted by Start Dat
✓ Task List														
Task Item	Submit Medical Do	cuments to VA	Q,	Date From	12/06/2022	<b></b>					Pre	eferences		
Referral Number				Date To		曲		Lock						
Last Name Start				Priority			Q							
Last Name End				Assigned Group			٩							
Task Status			Q	Work Group			Q							
	Pending X			Assigned User			Q							
Category of Care			Q,											
Start 🗘 Due Date 🗘	Referral Number	Task 🛟	Task Status	Priority Assigned User	Caroup Assigned Carology	Assigned Facility	Category of Care 🗘		Last Name	First Nar		Birth Sex Date of Birth	Completed	Comments
03/16/2023 🗧 03/16/2023	3 VA000006238	Submit Medical Documents to VA	Pending	Basic		VACCN TEST Facility	OPHTHALMOLOGY		ONE	Vet	eran I	Male 01/01/1900		Please add medical d
03/16/2023 03/21/2023	VA000006241	Submit Medical Documents to VA	Pending	Basic		VACCN TEST Facility	COMPLEMENTARY A		ONE	Vet	eran I	Male 01/01/1900		Please add medical d

Figure 40: Task List Screen

- 2. Review the task, including any comments.
- 3. Edit the **Priority** and **Status** fields as needed. To do this, select the **Magnifying Glass** icon <sup>(A)</sup> (also called lookup graphic by screen readers) within each field and select the appropriate option.
- 4. Edit the **Comments** field.

Task Edit					
* Task Item	Submit Medical Documents to VA		Due Date	02/22/2022	
* Priority	Basic	Q	* Start Date	02/22/2022	
* Status	Pending	Q			
Assign Task to User		Q			
Assigned To User Assign Task to Group		Q			
Assigned Facility	COMMUNITY MEDICAL CENTER	Q			
					+=
		Uselah Chave D			
		HealthShare R	teferral Manager		
					Accept Task Update

Figure 41: Task Edit Screen

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



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#### Figure 42: Task List

Task List >					HSRM - QA - R21	MR1 Adhoc 1							HSRM Training
isk List												÷	Sorted by Start Dat
<ul> <li>Task List</li> </ul>													
ask Item		c	۲. Date	From	12/07/2022	m				Pre	ferences		
eferral Number			Date	То		<b>#</b>		Lock					
st Name Start			Prior	ity			Q						
st Name End			Assi	gned Group			Q						
sk Status		c	•	k Group			Q						
	Pending X		Assi	gned User			Q						
ategory of Care		c	2										
Start Due Date 🗘	Referral Number C T	ïask ≎	Task Status	Priority C Assigned User	Group	Assigned Facility	Category of Care 🗘		Last Name	<ul> <li>First</li> <li>Name</li> </ul>	Birth Sex Date of Birth	Completed	Comments
03/16/2023 03/17/2023	VA000005281 N												
		Message from VA to Community	Pending	Basic		VACCN TEST Facility	RADIOLOGY MRI/MF	AS	ONE	Veteran	Male 01/01/1900		Please upload treatm
03/16/2023 03/17/2023	VA000006243 C	Vessage from VA to Community Contact Patient, VA request to Community	Pending Pending	Basic			RADIOLOGY MRI/MF	RA	ONE	Veteran Veteran	Male 01/01/1900 Male 01/01/1900	-	
03/16/2023 03/17/2023 03/16/2023 03/16/2023	VA000006243 C C	Contact Patient, VA request to	Pending			Facility VACCN TEST							treatm Please contact
03/16/2023 📕 03/16/2023	VA0000006243 C VA0000005281 A C	Contact Patient, VA request to Community Add Documentation, VA request to	Pending Pending	Basic		Facility VACCN TEST Facility VACCN TEST	PULMONARY		ONE	Veteran	Male 01/01/1900		treatm Please contact veter Please add documents
03/16/2023 03/16/2023 03/16/2023 03/16/2023	VA000006243 C VA000005281 A VA000006238 S	Contact Patient, VA request to community Add Documentation, VA request to community	Pending Pending Pending	Basic Basic		Facility VACCN TEST Facility VACCN TEST Facility VACCN TEST	PULMONARY RADIOLOGY MRI/MF	RA	ONE	Veteran Veteran Veteran	Male 01/01/1900 Male 01/01/1900 Male 01/01/1900		treatm Please contact veter Please add documents Please add media d
03/16/2023 03/16/2023 03/16/2023 03/16/2023	VA000006243 C VA000005281 A VA000006238 S	Contact Patient, VA request to Community Add Documentation, VA request to Community Submit Medical Documents to VA	Pending Pending Pending	Basic Basic Basic		Facility VACCN TEST Facility VACCN TEST Facility VACCN TEST Facility VACCN TEST	PULMONARY RADIOLOGY MRIMIE OPHTHALMOLOGY COMPLEMENTARY A	RA	ONE ONE ONE	Veteran Veteran Veteran	Male 01/01/1900 Male 01/01/1900 Male 01/01/1900		treatm Please contact veter Please add documents Please add medic d Please add medic
03/16/2023 03/16/2023 03/16/2023 03/16/2023	VA000006243 C VA000005281 A VA000006238 S	Contact Patient, VA request to Community Add Documentation, VA request to Community Submit Medical Documents to VA	Pending Pending Pending	Basic Basic Basic		Facility VACCN TEST Facility VACCN TEST Facility VACCN TEST Facility VACCN TEST	PULMONARY RADIOLOGY MRIMIE OPHTHALMOLOGY COMPLEMENTARY A	RA	ONE ONE ONE	Veteran Veteran Veteran	Male 01/01/1900 Male 01/01/1900 Male 01/01/1900		treatm Please contact veter Please add documents Please add medic d Please add medic

6. After editing the task, users can complete the task by selecting the task row to access the section of the referral where they can complete the task.

Figure 43: Referral Details Screen

E 🏫 Back to: Task List	· >		HSRM - QA - R21 MR1 Adhoc 1			📕 HSRM Tra	aining
ONE, Veteran	DOB: 01/	01/1900	Age: 123 Yrs	<u>Bar</u>			
Referral Details							i i
* Referring Facility Referring Facility Phone Referring Facility Fax * Referring Provider * Priority > Service/s Requested	Togus VA Medical Center 877-881-7618 or 207-623-8411 ext. 6121 Option 5 207-626-4780 NPI: Routine	* Provisional Diagnosis * Referral Date Clinically Indicated Date Referral Expiration Date	H542X12 Low vision r eye category 1, low v 10/25/2022 10/31/2022 10/25/2023	Level of Care Coordination	Moderate Add/View Documents		
Category of Care * Service Requested		OPHTHALMOLOGY Eye Care Advanced E	ye Treatment SEOC 1.2.10 PRCT				
For additional billing and rei If additional services are ne Precertification: The Depart Insurance (OHI). The Veter imperative that you notify th	the services authorized under this standardized epis ferral information, please click the "Billing and Other F eded, or for questions related to this referral, please of timent of Veterans Affairs (VA) is required by law to obl ans Health Administration (VHA) Office of Community VAI fyou have scheduled any of these specific serv JNITYCARE/providers/PRCT_requirements.asp	eferral Information" tab underner ontact the referring VA facility list ain precertification and bill Third Care (OCC) Standardized Episo	ath the "Print" tab on the vertical ellipse action menu is ed above. Party Payers for care that is not related to a Veteran's e Of Care (SECC) referral you have accepted may is	in the top right corner of this screen s Service Connection or Special Au include specific services that requir	thority for Veterans that have ( e Third Party Payer precertifica	ation. It is	2

7. When users update a task, they can mark the task as complete.

#### 4.10.3 Mark a Task Complete

From the **Task List**, users can mark an item as complete.

To mark a task as complete:

34



1. Select the **Menu** icon ≡ (also called link menu for screen readers) and select the **Task List** option.



				HSRM - QA	- R21 MR	Adhoc 1					🖭 HSRM	Train
U.S. Department of Veterans Affairs									Sorted by Date Added	Toggle N	Aultiple Selection	:
Search	0	SSN \$	Service 🗘	Priority 🗘	Optional Task(s)		Referral Number	Category of Care 🗘	Status 🗘	Community Provider / Facility	≎ Appt ≎	
Find Referral by Patient Find Referrals	10	000000000	Pulmonary Function Testing SEOC 1.4.3	Routine		10/25/2022	VA0000006243	PULMONARY	First Appointment Made	VACCN TEST Facility	10/27/2022	
Referral List Task List	10	000000000	Orthopedics General_PRCT SEOC 1.0.13	Routine		10/25/2022	VA0000006239	ORTHOPEDIC	First Appointment Made	VACCN TEST Facility	12/01/2022	
Reports     Tools	10	000000000	Cardiology Cath - PCI SEOC 1.1.11 PRCT REV	Routine		10/25/2022	VA0000006235	CARDIOLOGY	First Appointment Made	VACCN TEST Facility	11/15/2022	
	0	000000000	Cardiology Comprehensive_PRCT SEOC 1.4.13	Routine		10/25/2022	VA0000006242	CARDIOLOGY	Sent	VACCN TEST Facility		
	O	000000000	Acupuncture Chronic Care Management SEOC 1.1.9	Routine		10/25/2022	VA000006241	COMPLEMENTARY A		VACCN TEST Facility		
	ю	000000000	Eye Care Advanced Eye Treatment SEOC 1.2.10 PRCT	Routine		10/25/2022	VA000006238	OPHTHALMOLOGY	Sent	VACCN TEST Facility		

- 2. Locate the task on the Task List.
- 3. Select the box in the **Completed** column of the task.
  - » Note: You may also use the Breadcrumb Trail to return to the Task List and mark the task as Complete.

Figure 4	45:	Task	List	Screen
----------	-----	------	------	--------

Task List >					HSRM - QA - R	21 MR1 Adhoc 1							👱 HSRM Trainin
Task List												÷	Sorted by Start Dat
✓ Task List													
Task Item Referral Number Last Name Start Last Name End Task Status Category of Care	Pending X	C	Di Pr As Q	ate From ate To iority ssigned Group ork Group ssigned User	12/07/2022	10 10	ର ର ର ର	Lock		Pre	ferences		
Start Due Date	Referral Number	≎ Task ≎		Priority Assigned User	<ul> <li>Assigned</li> <li>Group</li> </ul>	Assigned Facility	Category of Care 🗘		Last Name	First Name	Birth Sex Date of Birth	Completed	Comments
03/16/2023 03/17/2	23 VA0000005281	Message from VA to Community	Pending	Basic		VACCN TEST Facility	RADIOLOGY MRI/MR	A	ONE	Veteran	Male 01/01/1900		Please upload treatm
03/16/2023 03/17/2	023 VA0000006243	Contact Patient, VA request to Community	Pending	Basic		VACCN TEST Facility	PULMONARY		ONE	Veteran	Male 01/01/1900		Please contact veter
03/16/2023 03/16/2	023 VA0000005281	Add Documentation, VA request to Community	Pending	Basic		VACCN TEST Facility	RADIOLOGY MRI/MR	A	ONE	Veteran	Male 01/01/1900		Please add documents
03/16/2023 📕 03/16/2	023 VA0000006238	Submit Medical Documents to VA	Pending	Basic		VACCN TEST Facility	OPHTHALMOLOGY		ONE	Veteran	Male 01/01/1900		Please add media d
03/16/2023 03/21/2	023 VA0000006241	Submit Medical Documents to VA	Pending	Basic		VACCN TEST Facility	COMPLEMENTARY A INTEGRATIVE HEALT		ONE	Veteran	Male 01/01/1900		Please add media d
													_
													Find

#### 4.11 Requests for Services

If a community provider needs a new referral from VA, either due to an expiring referral or the provider needs to provide a service not currently included in the SEOC, a **Request for Services** 



form must be submitted from an existing referral. The user can upload a completed and signed **Request for Services** form into HSRM or use the online **Request for Services Questionnaire**.

To upload a signed **Request for Services** form in HSRM, please see the <u>Manage Documents</u> section of this guide.

To use the online Request for Services Questionnaire, the community provider facility must have a user provisioned with the Community Care Provider HSRM Security Group to electronically sign the online RFS form. To receive access to the Community Care Provider HSRM Security Group and electronically sign the online RFS, the user must be a credentialed M.D. A Community Staff user can complete the online RFS form and send it to the Community Care Provider user for signature.

To complete the online Request for Services Questionnaire:

1. Select the **Action Menu** ••• icon on the corresponding referral row or from the **Patient Banner** on the **Referral Details** screen.

Figure 46: Action Menu

∃ A Back to: Referral	List >						HSRM Training
ONE, Veteran	DOB: 01/0	1/1900		Age: 124 Yrs	14,990 Å	•••	
Referral Details							
*Referring Facility	Togus VA Medical Center	*Provisional Diagnosis	S52612B Disp fx of I u	ulna styloid process,	Level of Care Coordination	Moderate	
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121	* Referral Date	10/25/2022			Add/View Documents	
	Option 5	Clinically Indicated Date	10/31/2022		Veteran's Medical Record		
Referring Facility Fax	207-626-4780	*Referral Expiration Date	05/01/2023				
*Referring Provider	NPI:						
* Priority	Routine						
✓ Service/s Requested							
Category of Care		ORTHOPEDIC					
* Service Requested		Orthopedics General_F	PRCT SEOC 1.0.13				
		SEOC Details					
This referral is only valid for	r the services authorized under this standardized ep	isode of care (SEOC). An overvi	ew of services and num	ber of visits authorized fo	r this SEOC can be viewed using	the "SEOC Details" link above.	
For additional billing and re	ferral information, please click the "Billing and Other	Referral Information" tab under	neath the "Print" tab on	the vertical ellipse action	menu in the top right corner of thi	s screen.	
If additional services are ne	eeded, or for questions related to this referral, please	e contact the referring VA facility	listed above.				
Health Insurance (OHI). Th	tment of Veterans Affairs (VA) is required by law to o e Veterans Health Administration (VHA) Office of Co		, ,	EOC) referral you have a	ccepted may include specific serv		
102 IS 10.1 1						Apply	Update

2. Select Requests for Services.



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Back to: Referral List >						Add Task	
ONE, Veteran	DOB: 01/0	/1900		Age: 124 Yrs		Patient Details	
Referral Details						Additional Referral Information	
*Referring Facility	Togus VA Medical Center	*Provisional Diagnosis	S52612B Disp fr of L	ulna styloid process, init for opn fx type I/2	Level of Care Coordination	Record Contact	
Referring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121 Option 5	*Referral Date				Requests for Services	
Referring Facility Fax	207-626-4780	Clinically Indicated Date	10/31/2022		Veteran's Medical Record	~	
*Referring Provider		*Referral Expiration Date	05/01/2023				
*Priority	Routine						
<ul> <li>Service/s Requested</li> </ul>							
Category of Care		ORTHOPEDIC					
* Service Requested		Orthopedics General_PRC1	SEOC 1.0.13				
		SEOC Details					
This referral is only valid for the services	authorized under this standardized episode of care (SEOC). An overview	of services and number of visits authorized fo	r this SEOC can be viewed usin	ng the "SEOC Details" link above.			
For additional billing and referral information	tion, please click the "Billing and Other Referral Information" tab undernear	h the "Print" tab on the vertical ellipse action	menu in the top right corner of I	this screen.			
If additional services are needed, or for o	questions related to this referral, please contact the referring VA facility liste	d above.					
Care (SEOC) referral you have accepted	rans Attairs (VA) is required by law to obtain precentification and bill Third F I may include specific services that require Third Party Payer precentification TYCARE/providers/PRCT_requirements.asp						
	ommunity Care Medical Policies describe standard VA health care benefits quested, Community Care Medical Policies will be used to determine appro					Polic	
Please refer to the Billing and Other Refe	erral Information tab for details on the precertification requirements related	to this approved referral and Veteran.					
	nents: ** Must follow the VA National Protocol and clinical guidance for Esi Tool available here: https://www.pbm.va.gov/apps/VANationalFormulary/	etamine or Ketamine administration. Ketamin	e treatments for mental health	or for pain are not approved under a CCN referral. Pr	or to administration it is required the ordering a	ind i	
	nes and complete the required Opioid Safety Training found here: https://w	ww.va.gow/COMMUNITYCARE/providers/ED	U_Training asp				
~ Authority							
* Program Authority	Authorized/Pre-authorized VA Referral (not othe	wise specified) - 1703					
<ul> <li>Insurance Details</li> </ul>							
VA Payer Status	VA - Primary Payer						
<ul> <li>Referral Processing Information</li> </ul>							

- 3. On the **Requests for Services** screen, select the **New** icon New .
  - » Note: Any Requests for Services previously submitted will appear on the Requests for Services screen.

Figure 48: Requests for Service New Icon

∃ A Back to: Referral Details	>					M Training
ONE, Veteran	DO	B: 01/01/1900	Age:	124 Yrs	A/WA	
✓ Requests for Services						New
Questionnaire	Date of Request	Current Status	Adjudication	Requester Facility	Organization Name	
		He	valthShare Referral Manager			

4. On the **Questionnaire List** screen, select **Request for Services Questionnaire**.



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E 🏫 Back to: Additional Ref	ferral Information >		E HSRM Training
ONE, Veteran	DOB: 01/01/1900	Age: 124 Yrs	
Questionnaire List			Sorted by Group
Code	Description		Group 🗘
VARFS	Request for Services Questionnaire		VARFS
		HealthShare Referral Manager	

#### 5. Complete all required fields and details of the request.

Figure 50: Requests for Services Questionnaire

Back to: Questionnaire List >			L HSRM Training
ONE, Veteran	DOB: 01/01/1900	Age: 124 Yrs	
Request for Services Questionnaire			A
	for Services (RFS)		
COMMUNITY PROVIDERS: Each Request for Se	ervices (RFS) form may only be for one type of service. F	FS Forms that request multiple services will be denied by VA staff.	
If you need to request multiple services, complete	one RFS form for the first service, sign and submit it in	tSRM, then begin a new RFS form, and repeat as necessary.	
Sections I, II, and III are required for each RFS.			
Sections IV, V, VI, VII/VIII, and IX are mutually exc screen.	clusive. If you need to enter details in several of these se	ctions, you need to complete several RFS forms. Note that Sections VII and VIII are linked and	I are therefore combined in this HSRM
✓ Section I: Veteran Information			
Previous Authorization Number	VA0000006245		
Today's Date	02/12/2024		
Veteran's First Name	Veteran		
Veteran's Middle Name			
Veteran's Last Name	ONE		
Veteran's DOB	01/01/1900		
Veteran's SSN	00000000		
			Apply Update

- 6. Select the checkbox for the **Requesting Provider Signature** (Community Care Provider security group user only).
  - a. If the RFS is completed by a Community Staff user, the form must be routed via the drop-down option to a Community Care Provider user for signature before submission to VA.
- 7. Select **Sent to VA** from the **Request Status** drop-down list and submit your request by selecting the **Apply** or **Update** button .



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#### Figure 51: Requesting Provider Signature and Request Status

⊟ 合 Back to: Questionnaire List >			👤 HSRM Trainin	ng
I do hereby acknowledge that VA reserves the right to perform the req the clinically indicated date (3) it is determined to be within the patient VA agrees the service(s) are clinically indicated. VA will provide a refe addressing significant findings, and providing continued care. * Requesting Provider Signature * Today's Date	's best interest. Upon completion of rral for services to be performed in th 02/12/2024	Age: 124 Yrs eria are met: (1) The patient agrees to receive services from VA (2) Service(s) are available at VA facility and a the requested service(s). VA will provide all resulting medical documentation to the ordering provider. If all crite he community. I do hereby attest that upon receipt of order/consult results, I will assume responsibility for revie	are able to be provided by ria listed are not true and wing said results,	••
✓ Request Status				
Request Status	Sent to VA Description		Q, Code	
> Adjudication	Draft		1	
> Administrative and Audit Details	Sent to Communi	ty Care Provider for Signature	2	
	Sent to VA		3	
	Cancelled		6	
	Pending – Additio	nal Medical Documentation Required	7	
	Pending – Other	Information Required from Provider	8	
		Dago 1		-
			Apply Update	

- » Note: When VA has adjudicated the request, you will receive a Review Adjudicated RFS task on the Task List.
- » Note: If a Community Staff user completes the RFS form and sends it to the Community Care Provider for signature, a Sign and Submit Request for Services task will appear on the Task List.

#### 4.12 Community Provider Precertification

There may be occasions when a referral requires VA to call TPPs for precertification for patients who are VHA beneficiaries with other billable health insurance (OHI).

#### 4.12.1 Identify Referrals Requiring OHI Precertification

If a referral requires OHI precertification, it will have either **PRCT REV** or **PRCT** listed in the SEOC name.

1. To view precertification details, select the row of the referral.

Figure	52:	Referral	Screen	- SEOC
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∃ 合						HSRM - QA	- R21 MR*	Adhoc 1					👱 HSF	M Trainii
Referral List											Sorted by Date Added	1 Toggle	Multiple Selection	n :
> Referrals														
Referring Facility		First Name	Date of Birth	SSN 🗘	Service 🗘	Priority 🗘	Optional Task(s)	Date Added	Referral Number	Category of Care 🗘	Status 🗘	Community Provider / Facility	C Appt Date	¢
Fogus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Pulmonary Function Testing SEOC 1.4.3	Routine		10/25/2022	VA0000006243	PULMONARY	First Appointment Made	VACCN TEST Facility	10/27/202	
ogus VA Aedical Center	ONE	Veteran	01/01/1900	000000000	Orthopedics General_PRCT SEOC 1.0.13	Routine		10/25/2022	VA0000006239	ORTHOPEDIC	First Appointment Made	VACCN TEST Facility	12/01/202	
ogus VA Nedical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Cath - PCI SEOC 1.1.11 PRCT REV	Routine		10/25/2022	VA0000006235	CARDIOLOGY	First Appointment Made	VACCN TEST Facility	11/15/202	
logus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Cardiology Comprehensive_PRCT SEOC 1.4.13	Routine		10/25/2022	VA000006242	CARDIOLOGY	Sent	VACCN TEST Facility		
Togus VA Medical Center	ONE	Veteran	01/01/1900	000000000	Acupuncture Chronic Care Management SEOC 1.1.9	Routine		10/25/2022	VA000006241	COMPLEMENTARY A		VACCN TEST Facility		



## 4.12.2 View Precertification Instructions

Once on the **Referral Details** screen, community providers can view the precertification information on:

The **Service/s Requested** section, titled Precertification.

The **Offline Referral Form** under the Precertification section. Select the **Component Menu** (vertical ellipsis located top right of the screen), and, under **Print**, select **Offline Referral Form**. The **Billing and Other Referral** Information sheet is under the Precertification section. Select the **Component Menu**, then select **Billing and Other Referral Information** under **Print**.

Figure 53: Referral Details – Precertification Instructions

Eack to: Referral	List >		HSRM - QA - R21 MR1 Adhoc 1		<b>.</b> H:	SRM Training
ONE, Veteran	DOB: 01/	01/1900	Age: 123 Yrs		<u>100</u>	
Referral Details						÷ ^
*Referring Facility	Togus VA Medical Center	*Provisional Diagnosis *Referral Date	M223X2 Other derangements of patella, left 10/25/2022	Level of Care Coordination	Moderate	
Referring Facility Phone Referring Facility Fax	877-881-7618 or 207-623-8411 ext. 6121 Option 5 207-626-4780	<ul> <li>Referral Date</li> <li>Clinically Indicated Date</li> <li>Referral Expiration Date</li> </ul>	10/25/2022 10/31/2022 05/30/2023	Veteran's Medical Record	Add/View Documents	
* Referring Provider * Priority	NPI: Routine					1
✓ Service/s Requested						
Category of Care * Service Requested		ORTHOPEDIC Orthopedics General_	PRCT SEOC 1.0.13			
		SEOC Details				
			of services and number of visits authorized for this S ath the "Print" tab on the vertical ellipse action menu in			
If additional services are ne	eded, or for questions related to this referral, please	contact the referring VA facility list	ted above.			
Insurance (OHI). The Veter imperative that you notify the	ans Health Administration (VHA) Office of Community	Care (OCC) Standardized Episo	Party Payers for care that is not related to a Veteran's de Of Care (SEOC) referral you have accepted may in so that VA can notify the Third Party Payer. Notificatio	nclude specific services that requ	re Third Party Payer precertification. It is	
					Apply	Update

» Note: The Precertification section instructs community providers to navigate to the <u>Community Care website</u> for further notification details. You can either copy and paste the text link into your web browser, or, if available, directly select the link to open the page.

### 4.12.3 View Community Care Precertification Web Page

Once on the Community Care precertification web page, please read the precertification notification instructions.

1. To identify if a specific service requires precertification, scroll down to Standardized Episodes of Care (SEOC) Billing Code Information, and select the link titled License for Use of Current Procedural Terminology.



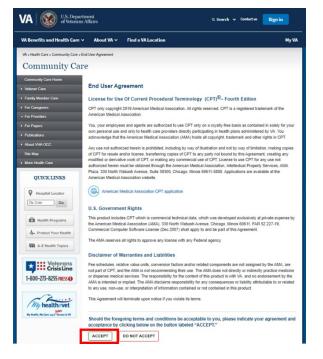
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*Figure 54: Community Care Precertification Requirements Web Page* 

VA WIS Depart	tmont Q Search ❤ Contact w Sign In Afflites	A-Z Health Tepics	(608) 821-7525	Indianapolis, IR: Cleveland, OH: Columbus, OH: Cincinnad, OH: Dayton, OH: Chillcothe, OH VISN 12: Iron Mountain, MI: Madison, WI: Milwaukee, WI, Tornah, WI: Chicago, II: Hires, II: North Chicago, II: Blann, R.
VA Benefits and Health Care v		1-800-273-8255 MESS	Central Plains CPAC (913) 578-4538	VISN 15. Heartland (E. Kansas; Wichita, KS; Columbia, MO); St Louis/Poplar Bluff, MO; Marion, IL
Community Care Home		My health vet		VISN 191 Montana, Cheyenne, WY, Sharidan, WY, Sah Lake GN, UT, Eastern Colorado, CO, Grand Junction, CO, Muskegee, OK, Okkehoma City, OK VISN 23, Fargo, ND, Minneapolis, NN, St Cloud, MN, Black Hills, SD, Sioux Falls, SD, Omaha, NE
Veteran Care     Family Member Care     For Caregivers     For Providers	Precertification Requirements The Vikin requires the ball here have present (TTP) for cares that is not related to a Vetroni's service connected disability of Spacificationary. This requires Vikin call TPP's for present/fication for patients who are Viki bandicates who thet ballah hava insurance (OVII). Prease note that cares for anotary across and to possess of accordance with Medican Matoma Councer Cognition (Mathematicated and, United State). Just Advance and accordance with Medican Matoma Councer Cognition (Mathematicated and, accordance with Medican Matoma Councer Cognition (Mathematicated and, accordance with Medican Matoma Councer Cognition (Mathematicated and).		West CPAC (702) 341-3562	VISN 22 Alaska: Pugat Sound, WA, Spokane, WA, Walla Walla Walla, WA, Bolse, IO, Portland, OR, Roseburg, OR, White Oly, OR VISN 21: Northern California; Cannal California; San Francisco, CA, Pala Atto, CA, Pacific Istanis; Sierra Reverso, NV, Southern Nevada, NV VISN 22: Las Angales, CA, Long Back, CA, Loren Linde, CA, San Diago, CA:
Overview Latest News	Third Party Payer Precentification Form     (     (     ) VA Billing Codes Information		Fax numbers by Consolidate	N. Arizona, AZ, Phoenix, AZ, S. Arizona, AZ, New Mexico, NM rd Patient Account Center (CPAC) Region
COVID-19 Guidance  Education and Training  Veteran Care	The preferred method for submitting requests is via the HealthShare Referral Management (HSRM) provider portal uning the Task: CCN PRECERTIFICATION NOTIFICATION. Although this is the preferred method of notifying Revenue Operations of precentification, the request can also be submitted via fax. Once the community can pervide than strateMeth VAR Revenue. Operations that the testprocedure admission requiring			Care (SEOC) Billing Code Information ordes preapproved billing codes associated to the services within each available
Family Member Care     Request and Coordinate Care	Once we commany care provide nas name ar the revenue optimation and we receip occurs and and receipting TPP proceedings is a scheduled, there is no requirement to wait for the TPP approval or response prior to performing the test/procedure/admission included as part of the SEOC referral.		While the codes have been clinical	ig codes that require TPP precertification, called "Precertification (Precert) Codes." sly approved in the referral by the VA as part of the SEOC, an additional utmitted by VHA Revenue Operations to the Veteran's TPP for the precert codes.
Care Coordination Overview Precertification Requirements	If you are interested in more information about HealthShare Referral Manager, please review our Care Coordination page. To sign up for the HSRM Provider Portal, please select the <i>Community Care Referral and Automization</i> (CCRA) option from the AccessIVA webble.		Prior to desting the in the License for Us	A SECC Rition Code List way must accept the terms and conditions defined a Of Current Procedural Terminology.
Request for Service (RFS) Requirements	Gare Coordination-HSRM information		Additional Coding Informatio	
Durable Medical Equipment/ Pharmacy Requirements	Fax numbers by Consolidated Patient Account Center (CPAC) Region are listed below:		and related edits.	at claims for anciliary services will be processed in accordance with CMS NCCI, MUE,
Community Viewer HealthShare Referral Manager	CPAC / Fax number VISNs included		referring providers order/consult r	vices provided must be appropriate and necessary to accomplish the intent of the equest. The Standardized Episode of Care (SEOC) describes the most likely scope of s may be allowed in certain circumstances if necessary for completing the referral.
Azure Rights Management Services	Northeast CPAC VISN 1: Topus, ME, Manchester, NH: Central Western Masachusatts, (117) 276-3502 Bedford, MA, Boston, MA, Providence, RI, White River Jat, VT. Connecticut VISN 2: Western New York: East Consen, NJ: Born, NY, NY,		return to top .	

2. Select Accept on the bottom of the Community Care End User Agreement Web Page. Selecting Accept will download the SEOC precertification code list to your computer.

Figure 55: Community Care End User Agreement Web Page – Accept



## 4.12.4 View SEOC Billing Codes for Precertification

Once you open the file titled "SEOC-PRCT\_Code\_List.xlsx" from your downloads, you will be able identify which billing codes require precertification. Any billing codes in the **PRCT Billing Codes** column in red require precertification.

To locate a specific SEOC or billing code:



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- 1. Use the CTRL+F keyboard shortcut to pull up the search option in Excel.
- 2. Enter either the specific SEOC name or billing code to locate it in the document.
  - » Note: If a service requires precertification, you will need to create a manual task in HSRM for the Revenue team.

*Figure 56: SEOC Precertification Excel Document* 

A	8	c	D
	SEOC Billing Codes	PRCT Billing Codes	
SEOC Name	SEOC Billing codes in column B <u>DO NOT REQUIRE</u> precert notification.	PRCT Billing codes in column C (red and underlined)	Effective Date
vi	(Please note: Due to size, some SEOCs will be continued on the subsequent line. Example: General Surgery and General Surgery continued.)	DO REQUIRE precert notification.	
	20560, 20561, 97016, 97026, 97039, 97110, 97112, 97124, 97139, 97140, 97530, 97810, 97811, 97813, 97814, 99211, 99212, 99213, 99214, 99215, 58930	N/A	10/1/2021
Care Management			10/1/2021
	20560, 20561, 97016, 97026, 97039, 97110, 97112, 97124, 97139, 97140, 97530, 97810, 97811, 97813, 97814, 99211, 99211, 99213, 99214, 99215, \$8930	N/A	
Continuation of Initial			10/1/2021
Care			
Acute Inpatient	00104, 90870, 99217, 99218, 99219, 99220, 99221, 99223, 99223, 99225, 99226, 99231, 99232, 99233, 99234, 99235, 99236, 99238, 99239, 99354, 99355, 99356, 99357	N/A	
Psychiatric Involuntary			10/1/2021
			<b></b>
Acute Inpatient Psychiatric Voluntary	00104, 90870, 99217, 99218, 99219, 99220, 99221, 99222, 99223, 99224, 99225, 99236, 99231, 99233, 99234, 99235, 99236, 99238, 99239, 99354, 99355, 99356, 99357	N/A	10/1/2021
	99221, 99223, 99231, 99232, 99233, 99234, 99235, 99236, 99238, 99239, 99356, 99357	90791	
Rehabilitation	97221, 79222, 79223, 79231, 79232, 79233, 79233, 79230, 79230, 79239, 79330, 79331	90791	7/16/2021
	36415. 36416. 36591, 36592, 36593, 80047, 80048, 80050, 80051, 80053, 80061, 80069, 80076, 80202, 80329, 80330, 80331, 80414, 80415, 81000, 81001, 81002, 81003, 81005, 81007, 81015,	36800, 90935, 90937, 90940, 90947, 60420, 60491, 60492	
Acute Outpatient Center	81200, 81025, 81050, 82040, 82042, 82043, 82043, 82045, 82310, 8230, 82340, 82507, 82550, 82803, 82845, 82840, 82945, 82945, 8306, 83090, 83874, 83880, 84130, 84132, 84133, 84100, 84132, 84134, 84144	50000, 50555, 50557, 50540, 50547, 00420, 00451, 00451	
	84484, 84520, 84520, 84525, 84540, 84545, 84702, 84702, 84702, 85078, 85018, 85018, 85027, 85046, 85610, 85611, 85730, 86140, 86147, 86528, 86769, 86900, 87040, 87070, 87075, 87077, 87186,		7/16/2021
	87205, 88300, 83302, 88304, 88305, 88307, 88309, 88311, 88312, 90945, 90997, 93000, 93784, 96360, 96361, 96365, 96366, 96367, 96372, 96373, 96374, 96375, 99071, G0421, G2023, G2024		
	36415, 36416, 80047, 80048, 80053, 80061, 80076, 80306, 80307, 80320, 80321, 80322, 80323, 80324, 80325, 80326, 80327, 80328, 80345, 80346, 80347, 80348, 80349, 80350, 80351,	82670, 83735, 90791, 90865, 96116, 96121, 96125, 96132, 96133,	
	15/04.15, 10/41.01, 00/047, 00/043, 00/047, 00/04	96136, 96137, 96138, 96139, G0469, G0470	
	18105, 8107, 8105, 8105, 8105, 8105, 8205, 8205, 8256, 8256, 8256, 8267, 8274, 8283, 8268, 8274, 8283, 8294, 8248, 8453, 8294, 8244, 8453, 8472,	50130, 50137, 50130, 50135, 00405, 00470	
	84703, 84704, 85007, 85018, 85027, 85046, 85610, 85611, 85730, 86140, 86141, 86147, 86328, 86618, 86769, 86900, 87070, 87077, 87186, 87205, 88300, 88302, 88304, 88305,		
	88307, 88309, 88311, 88312, 90785, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90846, 90847, 90849, 90853, 90880, 90885, 90887, 90889, 96127, 96130, 96131,		10/1/2021
	96146, 96156, 96158, 96159, 96372, 97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158, 99078, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99354, 99355, 99406,		
	99407, 99484, 99492, 99493, 99494, 0362T, 0373T, G0176, G0177, G0396, G0397, G0409, G0410, G0411, G0442, G0443, G0463, G0466, G0467, G0468, G0480, G0481, G0482, G0483, G2023, G2024		
	99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215	N/A	1/4/2021
THP			AJ-JEOLE
	36415, 36416, 70210, 70220, 70450, 70460, 71045, 71046, 71047, 71048, 74176, 74177, 74178, 80047, 80048, 80051, 80053, 80061, 80069, 80074, 80076, 80195, 80202, 80305, 80306, 80307,	11102, 11103, 11104, 11105, 11106, 11107, 70470, 70486, 70487,	
	80414, 80415, 81000, 81001, 81002, 81003, 81005, 81007, 81015, 81020, 81025, 81050, 82040, 82043, 82103, 82247, 82248, 82306, 82384, 82542, 82550, 82565, 82570, 82607, 82652, 82728,	70488, 71250, 71260, 71270, 83520, 83735, 99070	
	82746, 82784, 82785, 82787, 82803, 82805, 82810, 82945, 82947, 82955, 82962, 83036, 83088, 83090, 83497, 83516, 83540, 83550, 83615, 83704, 83789, 83835, 83874, 83880, 83883, 84081,		
	84100, 84110, 84120, 84150, 84155, 84156, 84166, 84181, 84182, 84255, 84260, 84295, 84307, 84311, 84402, 84403, 84432, 84436, 84439, 84460, 84466, 84479,		
	84481, 84520, 84550, 84702, 84703, 84704, 85007, 85018, 85025, 85027, 85046, 85606, 85097, 85220, 85301, 85302, 85305, 85379, 85529, 85598, 85610, 85611, 85613, 85651,		
	85652, 85730, 86001, 86003, 86008, 86021, 86038, 86039, 86066, 86140, 86111, 86164, 86152, 86153, 86150, 86161, 86162, 86220, 86225, 86235, 86255, 86216,		
	86317, 86320, 86327, 86327, 86329, 863329, 86331, 86332, 86334, 86335, 86337, 86340, 86341, 86343, 863444, 86352, 86353, 86355, 86356, 86359, 86350, 86361, 86376, 86430, 864411, 86449, 86454, 86454, 86454, 86454, 86454, 86454, 866444, 86644, 866444, 8664		
	004000, 604001, 604003, 60400, 60470, 60310, 60300, 600003, 600003, 60016, 60035, 80043, 80043, 80043, 80043, 80043, 80043, 80085, 80085, 80098, 80/04, 80/04, 80/04, 80/04, 80043,		
SEOC Code	e List (+)		

## 4.12.5 Add a Precertification Notification Task

To add a task:

1. From the **Referral Details** screen, select the **Action Menu** (horizontal ellipsis located at the top right of the screen), then select **Add Task**.



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E. Velvran       DDB: 0101100       Age: 124 Yrs         terming Facility / Exc       **Porteional Dagenosis       BDB:252 Dips for a tight angular process, pet for ope to hype 102       Level of Care Coordination       In         terming Facility / Exc       2074 405-201 or 2074 220-201 miles 612 Ciption 5       **Porteional Dagenosis       BDB:252 Dips for a tight per series in the per to hype 102       Level of Care Coordination       In         terming Facility / Exc       2074 405-4100       Care coird in footande Date       BDB:252 Dips for a tight per series in the per to hype 102       Level of Care Coordination       A         terming Yourge       Readers       Care coird in footande Date       BDB:252 Dips for A0202       Velverain Medicar Record       A         terming Yourge       Readers       Care coird in footande Date       BDB:252 Dips for A0202       Velverain Medicar Record       A         terming Yourge       Readers       Cordination Date       BDB:252 Dips for A0202       Velverain Medicar Record       A         terming Yourge       Readers       Store S							_
terr in basis  terr in basis  terr in pacifie facility     Train 1761 or 2003 201 (1000)     Train 1761 or 2003 201     Train 1761 or 2004	Back to: Referral List	>					
Imply billing of billing	ONE, Veteran	DOB:	01/01/1900		Age: 124 Yrs		
http://pi.com//pi.c	Referral Details						
shire of scale / Prove ar 31-501 ar 207-522 bet 11 still at 207 bet 207 bet 207 bet 20 bet 11 still at 200 bet 200 bet 11 still at 200 bet 200 bet 200 bet 11 still at 200 bet 200 bet 200 bet 11 still at 200 bet	Distantes Continu		I Designed Diseases			Louis of Days Description	
http:/ptil/pix 2102-64700 Chickly indicated Date 10012022 Weinstrib Medical Riccol   http:/ptil/pix 2102-64700 Weinstrib Medical Riccol 96912023   weinstrib Medical Riccol 96912023 96912023   Total Pix					ulna styloid process, init for opn tx type V2	Level of Care Coordination	
etering Provide Sector   intra in the Display of D							1
Instrume       Destine       Destine         Section Recented       Instrume       Destine       Destine         Section Recented       Instrume       Destine       D						Veteran's Medical Record	
Services Requested Services Req			*Referral Expiration Date	05/01/2023			
ONTINEFERCE       ONTINEFERCE         envice Requised       ONTINEFERCE       OntineFERCE         and pack to Several (PCC SECO 1s 13)       Image to Several (PCC SECO 1s 13)       Image to Several (PCC SECO 1s 13)         and outpack to several seveand several several several several several sevevand several sever	* Priority	Routine					
ontopedias General, PECT SECC 1s 13           integrated Section         Compedias General, PECT SECC 1s 13           integrated Section         Section           inte	✓ Service/s Requested						
Constraint is nori valid for the senses withorcad under the standardized episode of care (SECC). An everywee of services and number of vides autionized for the SECC Constraint Constra static Constraint Constraint Constraint Constraint Constraint Co	Category of Care		ORTHOPEDIC				
series is not wait for the serves subcode under his standardized egoods of one (80:00). An evenue of series and monther of vitals subcoders for the 180:00 can be identify the 2000 Details" in each one of this screen.     additional series are needed of the 180 million of 00% Referent information the there the born lysts and one of this screen.     additional series are needed of the 180 million of 00% Referent information. The part of can be identify the 180 million of 00% Referent information. It is information the the loss and one of this screen.     additional series are needed of the 180 million of 00% Referent information. It is information the the loss and one of this screen.     additional series are needed of the 180 million of 00% Referent information. It is information the loss and the 180 million of 00% Referent information. The 180 million of 00% Referent information are bit information the loss and one of this screen.     addition is	* Service Requested		Orthopedics General_PRC	T SEOC 1.0.13			
additional billing and eleman information, piezze click the "Billing and Other Referra information" bio undersmatch the "Derive additional elemans" biol biol of the section of the sectio			IIIISEOC Details				
Authority     Authorized Pre-authorized VR Releval (rod othan-los specified) - 1703       Itearrance Details       Prev Statur       VR - Prinsury Payer	For additional billing and referral in It additional services are needed. Precentification: The Department of cells (ESC) (refered) (as have a a found at http://www.ag.ov/COM/ Community Cam Medical Pistolies, oriteria: Within additional envicos: Prease refer to the Billing and Oth Drug Safety and Administration: Rk Texanaly Si Must follow the VA Cpixel Safety (	Homation, piece dol, the "Dilling and Other Referral Information" tab und or for questions related to this eleman gluesses control the elemany QV aduit of Watersch Aflerer (VM), respectively, the proceedings of the piece control manual specific services but require Ther Plany Plany present Aduit TV-VME providence Plant, piece tab. The transpresent tab. Not Community, Care Medica Plant, and the present tab. Not community, Care Medica Plant, and the present factor of the transpresent en expeasing. Community, Care Medica Plant, and the used to define and the transpresent tab. The transpresent tab. The definition of the definition of the transpresent tab.	lementh the "Print" tab on the vertical ellipse action by toted above. This dept Pays Payses for care that is not related to a ta thicknow. It is imperative that you notify the VM by separate tay actions devines. Community Care elasted to this approved referrat and Veloran. The Esistemene of Natamies administration. Keden any	menu in the top right corner of theran's Service Connection or u have scheduled any of these providers may recommend as a fedical Policies and supporting ne treatments for mental health	This screen. Special Authority for Veterans that have Other Health specific services for a Veteran that has OH, so that V mesessary for a Veteran. Price to growding care, provi internation can be found at. https://www.va.gov/CON	VA can notify the Third Party Payer. Notificatio iders should use the Community Care Medical IMUNITYCARE/providers/Medical-Policy asp	n det Polic
Insurance Details Payer Status VA- Printury Payer	~ Authority						
Payer Status VA-Primary Payer	* Program Authority	Authorized/Pre-authorized VA Referral (no	ot otherwise specified) - 1703				
	✓ Insurance Details						
Reternal Processing Information	VA Payer Status	VA - Primary Payer					
	<ul> <li>Reterral Processing Information</li> </ul>	ation					

2. On the **Task Edit** screen, you can add a manual task for another user, a group of users, or yourself. Below are the different fields on the **Task Edit** screen:

Task Item – This is a mandatory field and needs to be selected from a list, as noted by the magnifying glass. Since this is a task for the Revenue team, select Provider Precert Notification.
Priority – This is another mandatory field that has a list. It is already filled in as Basic.
Status – The status is preset to Pending since this is a new task. It is mandatory as well.
Assign Group – Because this is a task for HSRM Revenue staff, you need to assign the task to the Revenue Utilization Review (RUR) Nurse group.

- 3. Add comments to specify for which service and billing code number you are requesting the precertification, appointment date, diagnosis, and associated NPI number.
- 4. Save the changes. Remember, selecting **Update** saves the data and will only be available when all mandatory fields are complete.
- 5. Select Update.
- 6. VA Revenue staff members can now view the task. You may proceed with the service. There is no requirement to wait for VA or TPP approval or response prior to performing the test, procedure, or admission included as part of the SEOC referral.



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#### Figure 58: Task Edit

Task Edit						
* Task Item	Provider Precert Notification	Q	Due Date	01/06/2022	<b></b>	
* Priority	Basic	Q	* Start Date	01/06/2022	<b>m</b>	
* Status	Pending	Q				
Assign Task to User						
Assigned To User Assign Task to Group	RUR Nurse	Q				
Assigned Facility	Togus VA Medical Center	Q				
					42	_
		HealthShare R	eferral Manager			
					áccent Task	

» Note: The Precertification section of the VA Community Care web page also includes a link to the Third-Party Payer Precertification Form. If necessary, community provider users can download, complete, and submit the form in HSRM. Be sure to assign the TPP Pre-Cert Form document type to the form on the Add Document page for the respective referral.

#### 4.13 Canned Text

Canned text automatically populates text fields with predefined text items. Selecting the

**Canned Text** icon <sup>\*\*\*</sup> (also called canned text graphic by screen readers) will display existing items in the canned text library. Users can create their own canned text to populate any text field that contains the **Canned Text** icon <sup>\*\*\*</sup>.

To create canned text:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Navigate to the Referral Processing Information section. In the Comments box, enter the text you wish to save, highlight it, and then select the Plus icon. This will take you to the Canned Text screen.
- 3. On the Canned Text screen, enter a code to assign to the text. Select the Update button at the bottom right to save the canned text.

### 4.14 Generating Reports

HSRM can generate reports that display the types of services referred to a specific community provider/facility, as well as the current status of the referrals sent during the selected period.



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#### Figure 59: Report Types

Report Type	Description
Download Request for Services (RFS) Form	This paper RFS form may be uploaded into HSRM.
HSRM Reports Reference Guide	This report provides VA staff and community providers with the definitions and uses of all reports that they have access to.
Veteran Appointments Report	This report displays all the appointments at a specified VA or community provider facility. It allows VA staff, VA supervisors, and community providers to review the recent and upcoming Veteran appointments that are scheduled in HSRM. Report fields include Appointment Date, Appointment Status, Level of Care Coordination, and Referral Details.

To run a report:

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

Figure 60: Menu - Veteran Appointments Report

-	0			HSRN	1 - QA - MF					2	Community	/ Staff	
U.S. Department of Veterans Affairs										Date Added Toggle Multi	ple Selection	:	
<b>U</b>	Date of Birth 🔔	SSN 🗇	Service _	Priority 🗘	Optional	Date Added 🗘	Referral Number 🔔	Category of Care 🗘	Status 🐧	Community Provider / Facility 🗘	Appt Date 🗘		
Search					Task(s)							1	
Find Referral by Patient	01/01/1900	000000000	Cardiology Comprehensive	Routine		09/13/2021	VA000005282	CARDIOLOGY	First Appointment	COMMUNITY MEDICAL CENTER	09/14/2021		
Find Referrals			SEOC 1.4.10 PRCT	PRCT						Made			
Referral List	01/01/1900	000000000	000000000 Radiology MRI - MRA SEOC 1.0.8 PRCT REV		~	09/13/2021	VA0000005281	RADIOLOGY MRI/MRA	First Appointment	COMMUNITY MEDICAL CENTER	06/24/2022		
Task List									Made				
<ul> <li>Reports</li> </ul>	01/01/1900	000000000	000 Cardiology Routine Comprehensive SEOC 1.4.9 PRCT	Routine		06/14/2021	VA000005064	CARDIOLOGY	Sent	COMMUNITY MEDICAL			
Download Request for Services Form									CENTER				
HSRM Reports Reference Guide	01/01/1900	000000000	Radiology MRI -	Routine		06/14/2021	VA000005062	RADIOLOGY	Sent	COMMUNITY MEDICAL			
Veteran Appointments Report			MRA_REV_PRCT SEOC 1.0.7			MRI/MRA	MRI/MRA	<b>\</b>	CENTER				
> Tools	01/01/1900	000000000	Hematology SEOC	Routine		06/10/2021	VA000005034	HEMATOLOGY	Sent	COMMUNITY MEDICAL			
	0.000	00000000	1.0.8 PRCT	1000010		00.10.2021		1.2.11.102001		CENTER			

- » Note: The HSRM Reports Reference Guide option, located in Reports, provides directions and detailed information about the report.
- 2. Select the criteria needed to run the desired report from the fields available and select the **Preview** icon (also called "link graphic link opens Excel in a new window graphic preview" by screen readers) to run the report.



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#### Figure 61: Veteran Appointments Report Parameters

E 🏫 Veteran Appointments Report 🔉	HSRM - QA - MR1	QA Team Account
Report Parameters		
VA Facility		م
VA Facility List Community Provider/Facility		Q
Community Provider/Facility List Appointment Date From	06/08/2021	
Appointment Date To	06/22/2021 mm	
Level of Care Coordination		٩
Level of Care Coordination List Category of Care		٩
Category of Care List Appointment Status		٩
Appointment Status List	Preview	

3. Navigate to the report. Reports may be generated in PDF format or as Excel documents, and users can print and save them.

#### 4.15 Billing and Other Referral Information

The **Billing and Other Referral Information** sheet provides community providers with additional details related to the legal authority, claims submissions instructions, precertification requirements, and provision of prescriptions and durable medical equipment for the referral. Community providers can access this information sheet directly from the **Referral Details** screen. The information is also available on the **Offline Referral Form**. The information sheet will contain appropriate content based on the program authority. For example, a referral authorized as a Veterans Care Agreement, Community Care Network, or 1728 service-connected emergency care referral would contain content specific to that program.

To access the Billing and Other Referral Information sheet:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. From the **Referral Details** screen, select the **Component Menu** icon <sup>‡</sup> (also called Referral List component menu button by screen readers), then select **Billing and Other Referral Information**.



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*Figure 62: Component Menu – Billing and Other Referral Information* 

Back to: Referra	I List >	Healt	hShare Referral Mana	ger - QA - R23.0.3.0		Referral Details
ONE, Veteran	DOB: 01	1/01/1900		Age: 123 Yrs		✓ Print
Referral Details						Offline Referral Form
Referring Facility	Togus VA Medical Center	*Provisional Diagnosis	S82012Q Displ osteo	chon fx I patella, 7t	Leve	Billing and Other Referral Information
eferring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121	*Referral Date	09/06/2023			V Options
	Option 5	Clinically Indicated Date	09/11/2023		Vete	Record Appointment
leferring Facility Fax	207-626-4780	*Referral Expiration Date	03/04/2024			
Referring Provider						
Priority	Routine					
<ul> <li>Service/s Requested</li> </ul>	d					
ategory of Care		ORTHOPEDIC				
Service Requested		Orthopedics General_	REV_PRCT SEOC 1.0.	15		
		SEOC Details				
This referral is only valid f	or the services authorized under this standardize	d oploade of care (SEOC). An our	niow of condece and r	umbor of violte outborize	d for thic	
· · · · · · · · · · · · · · · · · · ·	eferral information, please click the "Billing and C					
~	needed, or for questions related to this referral, pl			on no ronnou empos de		
recertification: The Depa	rtment of Veterans Affairs (VA) is required by law DHI). The Veterans Health Administration (VHA) (	to obtain precertification and bill	Third Party Payers for o			

3. The **Billing and Other Referral Information** sheet appears, and users can print, download, and save it as a PDF.

Figure 63: Component Menu – Billing and Other Referral Information Sheet

Billing and Other Referral Information U.S. Department of Veterans A	ient ffairs
Referral Number: VA0000002306 Referring VA Facility: Batavia VA Medical Center	
Submitting Claims ANY CLAIMS RELATED TO THIS EPISODE OF CARE MUST BE SUBMITTED TO OPTUM UNITEDHEALTH C AND INCLUDE THE APPROVED REFERRAL NUMBER.	ARE
Methods to submit claims: Electronic Data Interchange (EDI): Payer ID for Medical and Dental – VACCN	
More information on how to submit claims can be found by visiting https://www.va.gov/COMMUNITYCARE/revenue_ops/Veteran_Care_Claims.asp.	
<b>Precertification</b> The Standardized Episode of Care (SEOC) referral you have accepted includes certain services that require Third PartyPayer (TPP) precertification. It is imperative that you notify the VA if you have scheduled any of these specifi services for a Veteran that has Other Health Insurance (OHI), so that VA can notify the TPP. VHA is required by la the TPP for care that is not for a Service Connection or Special Authority eligibility.	с

 $\star\star$ 

## **5** Clinical Viewer

The **Clinical Viewer** portal offers users a comprehensive view of a Veteran's medical documentation history in HSRM. Categories of information available in Clinical Viewer include a clinical summary of the patient's history, allergies, immunizations, any medications, lab results, procedures, and more. Clinical Viewer gives HSRM users a secure, centralized source of medical history and patient details for a Veteran in HSRM.

Clinical Viewer is accessible from the **Referral Details** screen for any Veteran that has relevant data in the system. To access Clinical Viewer from the **Referral Details** screen, users can either select the **Clinical Viewer** icon and the **Patient Banner** or follow the **Veteran's Medical Record** link in the **Referral Details** section.

Note: Clinical Viewer is unavailable for users in the Community View Only security group.

To access Clinical Viewer:

- 1. Locate the referral (refer to the Locate a Referral section of this guide).
- 2. Select the **Clinical Viewer** icon ion the Patient Banner or the **Veteran's Medical Record** link on the **Referral Details** screen.

∃  Back to: Referra	I List >	Heat	thShare Referral Manager - QA - R23.0.3.0		LISRM Training
ONE, Veteran	DOB: 01/0	01/1900	Age: 123 Yrs	2000	
Referral Details					÷ ^
*Referring Facility	Togus VA Medical Center	* Provisional Diagnosis	S82012Q Displ osteochon fx   patella, 7t	Level of Care Coordination Moderate	
Referring Facility Phone Referring Facility Fax	877-881-7618 or 207-623-8411 ext. 6121 Option 5 207-626-4780	* Referral Date Clinically Indicated Date	09/06/2023 09/11/2023	Add/View Documents	
* Referring Provider * Priority	Routine	*Referral Expiration Date	03/04/2024		- 1
✓ Service/s Requested	i i				
Category of Care		ORTHOPEDIC			
*Service Requested		Orthopedics General	REV_PRCT SEOC 1.0.15		
		SEOC Details			
This referral is only valid for	or the services authorized under this standardized	episode of care (SEOC). An ov	erview of services and number of visits authorized	d for this SEOC can be viewed using the "SEOC Details" link	above.
For additional billing and r	eferral information, please click the "Billing and Oth	ner Referral Information" tab un	derneath the "Print" tab on the vertical ellipse acti	on menu in the top right corner of this screen.	
If additional services are n	eeded, or for questions related to this referral, plea	ase contact the referring VA fac	ility listed above.		
				a Veteran's Service Connection or Special Authority for Veter ou have accepted may include specific services that require	
				Α	upply Update

Figure 64: Referral Details Screen

3. If the user selects the **Clinical Viewer** icon, a menu will open. Select the Veteran's Medical Record option. Alternatively, if the user selects the **Veteran's Medical Record** link in the Referral Details portion of the screen, it will bypass the menu and take them directly to Clinical Viewer.



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#### Figure 65: Clinical Viewer Access Menu

E 🏫 Back to: Referra	al List 🗲	Healti	hShare Referral Manager - QA - R	23.0.3.0	Veteran's Medical Record	>
ONE, Veteran	DOB: 0	1/01/1900	Age:	123 Yrs		
Referral Details						
Referring Facility	Togus VA Medical Center	*Provisional Diagnosis	S82012Q Displ osteochon fx I pat	ella, 7t Leve		
teferring Facility Phone	877-881-7618 or 207-623-8411 ext. 6121 Option 5	*Referral Date	09/06/2023			
eferring Facility Fax	207-626-4780	Clinically Indicated Date	09/11/2023	Vete		
Referring Provider	807-940-1190	* Referral Expiration Date	03/04/2024			
Priority	Routine					
<ul> <li>Service/s Requested</li> </ul>	d					
ategory of Care		ORTHOPEDIC				
Service Requested		Orthopedics General_I	REV_PRCT SEOC 1.0.15			
		SEOC Details				
his referral is only valid f	for the services authorized under this standardize	ed episode of care (SEOC). An ove	erview of services and number of vis	its authorized for this		
or additional billing and r	referral information, please click the "Billing and C	Other Referral Information" tab und	derneath the "Print" tab on the vertic	al ellipse action menu		
additional services are n	needed, or for questions related to this referral, p	lease contact the referring VA facil	ity listed above.			
	artment of Veterans Affairs (VA) is required by law DHI). The Veterans Health Administration (VHA) (					

4. The Clinical Viewer page will open, displaying patient medical history in HSRM. The categories of information available for viewing are in a list called the **Chartbook**. Select one of the categories in the Chartbook to view it.

Figure 66: Clinical Viewer Home Screen

Back to: Referral List >									🚬 HSRM Traini
									4
Chartbook	✓ Diagnoses	-	Sorted by Last Updat	ed, Diagnosis	✓ Lab Results				
Clinical Summary	Diagnosis 🗘	Туре	Last Updated 🗘		Order	Results	Collecti	on Date De	tails
Conditions	Encounter for immunization	PRIMARY	11/02/2023 10:58						
Allergies	Encounter for immunization	PRIMARY	11/02/2023 11:53						
Medications	PROPHY VACC. STREP PNEU	PRIMARY	01/20/2012 09:15						
~	VACCINATION FOR DTP-DTAP	SECONDARY	01/20/2012 09:15						
Documents	VACCIN FOR INFLUENZA	SECONDARY	01/20/2012 09:15						
Immunizations	Page 1 Next >								
Vital Signs									
Lab Results	✓ Allergies		Sorted by Last Upda	ted, Category	<ul> <li>Diagnostic Stud</li> </ul>	lies			
Diagnostic Studies	Allergen Reaction Source	Catego	ory 🗘 🛛 Last Upda	ted 🗘	Study	Ordering Clinician	Order Date	Test Date	Status
Procedures	PENICILLIN	DRUG	11/09/2011	11:45					
Histories	<ul> <li>Medications</li> </ul>		Sorted by Start Dat	e, Medication	✓ Documents [ Ac	ross All Episodes ]	Search	۹ 🗶	Grouped, Sorted
MINING TO THE REAL PROPERTY OF	Medication 🗘	Dose	Start Date 🗘	Details					
Encounters	PRIMARY CARE REFERRAL/NOPC		01/13/2012 09:58	:					
Appointments	BACK/JOINT		12/08/2011 08:44	:	Document 🗘	Source 🗘	Facility 🗘	Event Date 🗘	Detail
Care Team	Non-Formulary Drug Request Primary Care		12/08/2011 08:54						
Cohorts	Women's Health/NOPC		12/08/2011 08:44	<u> </u>	> Progress Note				
Claims	EXERCISE CLEARANCE		11/10/2011 10:28						
Demographics			11/10/2011 10:28	:					
	Page 1 Next >								

» Note: All information in Clinical Viewer is read-only, so users will not be able to print or download any information or documentation. Attempting to save images or data from Clinical Viewer may present security risks. Users must remove any saved data or images from their device after use.



## 6 Additional Resources

Contact the HSRM Help Desk for support. Open a ticket by phone at (844) 293-2272 or email <u>hsrmsupport@va.gov</u>.

Additionally, the following websites provide quick and easy access to commonly needed materials:

- » VA Community Care Website
- » HSRM Support Points of Contact List
- » Community Provider Information Sheet



# **Appendix A: Acronyms and Abbreviations**

Table 1: Acronyms and Abbreviations

Acronym or Abbreviation	Definition
Admin	Administrator
C6	Community Care Clinical Coordination Contact Center
СВОС	Community-Based Outpatient Clinic
CCN	Community Care Network
EDIPI	Electronic Data Interchange Personal Identifier
EOC	Episode of Care
HIE	Health Information Exchange
HSRM	HealthShare Referral Manager
ICN	Integration Control Number
IT	Information Technology
NPI	National Provider Identifier
ОНІ	Other Health Insurance
OS	Operating System
PDF	Portable Document Format
PII	Personally Identifiable Information
PPMS	Provider Profile Management System
RFS	Request for Services
RUR	Revenue Utilization Review
SAR	Secondary Authorization Request
SEOC	Standardized Episode of Care
ТРА	Third-Party Administrator
ТРР	Third-Party Payer
TRAIN	Training Finder Real-time Affiliate Integrated Network
VA	U.S. Department of Veterans Affairs
VAMC	Veterans Affairs Medical Center
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network



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# **Appendix B: Revision History Table**

Table 2: Revision History Table

Version	Date	Author	Description
0.1	Nov. 2018	CCRA Training Team	Initial Draft
0.2	Nov. 2018	Sam Weaver	QC Review
0.3	Nov. 2018	Jennifer Cote	JPM/PQAL Review
0.4	Nov. 2018	Susan Burke	PM Review
0.5	01/14/2019	Sam Weaver	Template Update
0.6	01/14/2019	Jennifer Cote	JPM/PQAL Review
1.0	01/14/2019	Susan Burke	PM Review
1.1	03/25/2019	Allyson Newman	Updates from 4.0 New screenshots throughout Alt Text added Updated TOC Updated Table of Figures Updated Table of Tables Text updates throughout Added Section 3.1.2: Billing and Other Referral Information Added screenshot of Component Menu with Billing and Other Referral Information option highlighted Added screenshot of Billing and Other Information Sheet Updated HSRM Help Desk phone number and TTY number
1.2	03/27/2019	Kathryn Hooker	QC Review Title page: Changed date to April 2019 and Version to 2.0; removed HSRM acronym Footer: Changed to Arial font Intro: Updated to mandatory version Appendix A: Added acronyms Throughout doc: • Edited alt text for brevity • Made minor changes to grammar and punctuation
1.3	05/08/2019	Jennifer Cote	JPM/PQAL Review



Version	Date	Author	Description
1.4	06/13/2019	Allyson Newman	Updates for Build 6.0 New screenshots throughout Expanded Requests for Services section with screenshots Updated TOC Update Table of Figures Updated Table of Tables Text updates throughout Minor punctuation Added a report
1.5	06/17/2019	Rachael Levine	Training Team Lead Review
1.6	06/17/2019	Allyson Newman	Updates to screenshots, text. Added Alt text
1.7	06/17/2019	Jennifer Cote	JPM/PQAL Review
2.0	06/17/2019	Susan Burke	Program Manager Review
2.1	06/21/2019	Allyson Newman	Added PPMS Provider Search
2.2	06/24/2019	Kathryn Hooker	QC review of updates
2.3	06/24/2019	Jennifer Cote	JPM/PQAL Review
3.0	08/13/2019	Allyson Newman	Updates for Build 7.0 New screenshots throughout Text updates throughout Updated TOC Updated Table of Figures Updated Table of Tables Updated Resource links Updated footer with date Updated Getting Access to HSRM section Updated alt text
3.1	08/22/2019	Staci Shelley	QC Review
4.0	03/02/2020	Allyson Newman	Updates for Build 7.5 Updated footer Spelling and grammar revisions Removed Provider Search and Additional Details section Updated alt text Updated screenshots Updated Table of Contents Updated Table of figures



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Version	Date	Author	Description
4.1	04/28/2020	Janay Hurley	Updates for Build 8.0 Updated Figure 5 Updated alt text for figure 5 Updated footer
4.2	04/29/2020	Jennifer Defreitas	Manager Review
4.3	04/29/2020	Kathryn Hooker	QC Review Updated intro text and Appendix A Verified links and alt text throughout
4.4	04/30/2020	Jennifer Cote	JPM/PQAL Review
5.0	05/01/2020	Susan Burke	Program Manager Review
5.1	05/26/2020	Sara Zarny	Updates for Release 9.0 Updated Figure 32 Updated alt text for Figure 32 Updated Figure 34 Updated alt text for Figure 34 Updated Figure 37 Updated alt text for Figure 37 Updated footer
5.2	05/29/2020	Janay Hurley	Training Team Lead Review
5.3	06/03/2020	Kathryn Hooker	QC review of updates
5.4	06/05/2020	Jennifer Cote	JPM/PQAL Review
6.0	06/07/2020	Susan Burke	Program Manager Review
6.1	07/30/2020	Allyson Newman	Updates for Release 10.0 Updated version number and date Updated footer Updated Figure 5 Updated Figure 9 Updated Figure 16 Updated Figure 17 Updated Figure 32 Updated Figure 33 Updated Figure 35 Updated Figure 37 Updated Figure 39 Updated Figure 39 Updated Table of Contents Updated Table of Figures Updated Table of Tables
6.2	08/11/2020	Rammy Sbeitan	Final QA Review

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Version	Date	Author	Description
6.3	08/17/2020	Allyson Newman	Updated Figure 9 Updated Figure 6 Updated Figure 12 Updated Figure 19 Updated Figure 22 Updated Figure 24
6.4	08/17/2020	Sara Zarny	Training QA Review
6.5	08/17/2020	Janay Hurley	Training Team Lead Review
6.6	08/17/2020	Kathryn Hooker	QC Review
6.7	08/20/2020	Jennifer Defreitas	Training Manager Review
6.8	08/21/2020	Jennifer Cote	JPM/PQAL Review
8.0	09/09/2020	Susan Burke	Program Manager Review
8.1	10/26/2020	Allyson Newman	Updates for Release 11.0 Replaced Figure 18 and added alt text Replaced Figure 19 and added alt text Updated text throughout Updated Table of Contents Updated Table of Figures Updated Table of Tables
8.2	11/04/2020	Kathryn Hooker	QC review of updates
8.3	11/16/2020	Jennifer Defreitas	Manager Review
8.4	11/17/2020	Jennifer Cote	JPM/PQAL Review
9.0	11/18/2020	Susan Burke	Program Manager Review
9.1	01/22/2021	Connor Reed	Technical Writer Review Updated title page to reflect Release 12.0 with no changes Updated footer to reflect version review and review date
9.2	03/10/2021	Jennifer Cote	JPM/PQAL Review
10.0	03/12/2021	Susan Burke	Program Manager Review
10.1	05/25/2021	Allyson Newman	Updates for Release 13.0 Updated text throughout Updated Figure 2 Updated Figure 3 Updated Figure 4 Updated Figure 5 Updated Figure 12 Updated Figure 38 Updated Figure 41 Updated Table 1



Version	Date	Author	Description
10.2	06/09/2021	Connor Reed	QA Review for Release 13 Updates Reviewed and updated all screenshots for PII/Privacy Updated Figure 10 Updated Figure 21 Updated Figure 22 Updated Figure 24 Updated Ianguage throughout Included note about C6 referrals Added Section 6: Clinical Viewer QA of updates 508 Compliance review
10.3	07/07/2021	Yasir Hashmi	Manager Review
10.4	07/12/2021	Kathryn Hooker	QC Review
10.5	07/16/2021	Jennifer Cote	JPM/PQAL Review
11.0	07/27/2021	Susan Burke	Program Director Review
11.1	08/02/2021	Connor Reed	Updated Clinical Viewer Figures 42, 43, 44
11.2	08/02/2021	Kathryn Hooker	QC Review
11.3	08/02/2021	Jennifer Cote	JPM/PQAL Review
12.0	08/02/2021	Susan Burke	Program Director Review
12.1	09/10/2021	Allyson Newman	Updates for Release 14.0 Updated text throughout Updated Figures 16, 17, 18, 19, 20, 31, 36, and 38 and updated alt text
12.2	09/13/2021	Connor Reed	QA of Release 14.0 Updates Inserted Figures 5 and 6 Updated Veteran Appointment Preference Language Inserted Section 4.1.3 Updated TOC and TOE
12.3	09/16/2021	Yasir Hashmi	Manager Review
12.4	09/20/2021	Lorelei Cox	Project Manager Review
12.5	09/20/2021	Kathryn Hooker	QC Review
12.6	09/23/2021	Jennifer Cote	JPM/PQAL Review
12.7	09/24/2021	Jennifer Parker	DPM Review
13.0	10/08/2021	Susan Burke	Program Director Review
13.1	12/08/2021	Allyson Newman	Initial review of updates needed for 15.0 Updated text and added comments



Version	Date	Author	Description
13.2	12/13/2021	Allyson Newman	Updates for Release 15.0 Updated Figures 2, 3, 20, and 21 Updated text throughout
13.3	12/16/2021	Connor Reed Allyson Newman	Updates for Release 15.0 Added section 13 about precertification process Updated Figure 4 Updated text
13.4	12/22/2021	Yasir Hashmi	Manager Review
13.5	12/27/2021	Lorelei Cox	Project Manager Review
13.6	12/28/2021	Kathryn Hooker	QC Review
13.7	12/29/2021	Jennifer Cote	JPM/PQAL Review
14.0	01/17/2022	Susan Burke	Program Director Review
14.1	03/03/2022	Allyson Newman	Initial review of updates for 16.0
14.2	03/03/2022	Allyson Newman	Updates for Release 16.0 Updated Figures 7 and 11
14.3	03/07/2022	Connor Reed	Updates for Release 16.0 Added the Find Referral by Patient Section
14.4	03/21/2022	Lorelei Cox	Project Manager Review
14.5	03/23/2022	Kathryn Hooker	QC review of updates
14.6	03/25/2022	Jennifer Cote	Project Manager – PMO Review
15.0	04/05/2022	Susan Burke	Program Director Review
15.1	05/13/2022	Allyson Newman	Initial review of updates for 17.0
15.2	05/16/2022	Allyson Newman	Updates for Release 17.0 Updated date and Release no. Updated Figures 14, 23, 24 Updated text throughout
15.3	05/27/2022	Connor Reed	QC of Release 17.0 updates, privacy edits, and 508 compliance validation
15.4	05/27/2022	Yasir Hashmi	Manager Review
15.5	05/31/2022	Lorelei Cox	Project Manager Review
15.6	06/02/2022	Kathryn Hooker	QC review of updates
15.7	06/03/2022	Jennifer Cote	Project Manager – PMO Review
16.0	06/22/2022	Susan Burke	Sr. Program Director Review
16.1	09/08/2022	Allyson Newman	Updates for Release 19.0 Updated text throughout Updated Figures 2-7, 10, 11, 13, 14, 18, 20, 23, 24, 26, 30, 32, 34, 36, 40, 41, 43, 44, 48, 50, 52, 54, and 56



Version	Date	Author	Description
16.2	09/12/2022	Connor Reed	Review of updates for Release 19.0
16.3	10/03/2022	Lorelei Cox	Project Manager Review
16.4	10/05/2022	Kathryn Hooker	QC review of updates
16.5	10/25/2022	Allyson Newman	Updated screenshots with new CV icon throughout
16.6	10/26/2022	Connor Reed	Review of updates
16.7	11/14/2022	Kathryn Hooker	QC Review
16.8	11/15/2022	Jennifer Cote	PMO Project Manager Review
17.0	11/17/2022	Susan Burke	Sr. Program Director Review
17.1	01/30/2023	Connor Reed	Release 20.0 Updates Updated release number Updated date
18.0	02/08/2023	Susan Burke	Sr. Program Director Review
18.1	03/15/2023	Allyson Newman	Release 21.0 Updates Updated release number Updated date Replaced Figures and updated Alt Text: 1-5, 7- 8, 15, 19, 28, 30, 34, 37-40, 42-47, 53
18.2	03/17/2023	Connor Reed	Review of 21.0 Updates
18.3	03/20/2023	Yasir Hashmi	Manager Review
18.4	04/20/2023	Kathryn Hooker	QC Review
18.5	05/01/2023	Jennifer Cote	PMO Project Manager Review
18.6	05/01/2023	Ariel Daza	Deputy Program Manager Review
19.0	05/03/2023	Jennifer Parker	Sr. Program Manager Review
19.1	06/07/2023	Allyson Newman	Release 22.0 Updates Updated release number Updated date Replaced Figures 11, 12, 13
19.2	06/07/2023	Connor Reed	Review of Release 22.0 updates
19.3	06/20/2023	Yasir Hashmi	Manager Review
19.4	06/20/2023	Lorelei Cox	Project Manager Review
19.5	06/26/2023	Kathryn Hooker	QC Review
19.6	07/03/2023	Jennifer Cote	PMO Project Manager
19.7	07/05/2023	Ariel Daza	Deputy Program Manager Review
20.0	07/10/2023	Jennifer Parker	Sr. Program Manager Review



Version	Date	Author	Description
20.1	09/26/2023	Allyson Newman	Release 23.0 Updates Updated release number Updated date Replaced figures 10, 11, 12, 19, 20, 21, 27, 31, 33, 35, 51, 53, 55, and 56
20.2	10/02/2023	Alex Hines	Review of Release 23.0 updates
20.3	10/16/2023	Yasir Hashmi	Manager Review
20.4	10/18/2023	Lorelei Cox	Manager Review
20.5	10/19/2023	Kathryn Hooker	QC Review
20.6	10/25/2023	Jennifer Cote	PMO Project Manager Review
20.7	10/25/2023	Ariel Daza	Deputy Program Manager Review
21.0	11/03/2023	Jennifer Parker	Sr. Program Manager Review
21.1	02/09/2024	Allyson Newman	Release 24.0 updates » Added RFS section » Added Reports section
21.2	02/21/2024	Yasir Hashmi	Manager Review
21.3	02/26/2024	Lorelei Cox	Project Manager Review
21.4	02/29/2024	Marwan Lavoie	QC Review
21.5	03/14/2024	Ariel Daza	Deputy Program Manager Review
21.6	03/15/2024	Jennifer Cote	PMO Project Manager Review
21.7	03/15/2024	Jennifer Parker	Sr. Program Manager Review
21.8	03/22/2024	Yasir Hashmi	Added RFS details under section 4.11
21.9	03/22/2024	Lorelei Cox	Project Manager Review
21.10	03/22/2024	Ariel Daza	Deputy Program Manager Review
22.0	03/22/2024	Jennifer Cote	PMO Project Manager Review

