

Department of Veterans Affairs

VistA Fee Separation of Duties

FB*3.5*151 and FB*3.5*154

Requirements Specification Document



December 2013

Version 1.2

Revision History

Note: The revision history cycle begins once changes or enhancements are requested after the Requirements Specification Document has been baselined.

Date	Version	Description	Author
1/27/2014	1.1	Added requirement 2.6.1.6.67	[REDACTED]
3/7/2014	1.2	Added requirements 2.6.1.6.68, 2.6.1.6.69, 2.6.1.6.70, 2.6.1.6.71, 2.6.1.6.72, 2.6.1.6.73 Deleted requirements: 2.6.1.2.57, 2.6.1.4.7, 2.6.1.4.37, and 2.6.1.6.40	[REDACTED]

Artifact Rationale

The Requirements Specification Document (RSD) records the results of the specification gathering processes carried out during the Requirements phase. The RSD is generally written by the functional analyst(s) and should provide the bulk of the information used to create the test plan and test scripts. It should be updated for each increment.

The level of detail contained in this RSD should be consistent with the size and scope of the project. It is not necessary to fill out any sections of this document that do not apply to the project. The resources necessary to create and maintain this document during the life cycle of a large project should be acknowledged and clearly reflected in project schedules. Do not duplicate data that is already defined in another document or a section in this document; note in the section where the information can be found.

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1. Introduction

1.1. Purpose

The purpose of this document is to document the software requirements for the VistA Fee Separation of Duties project.

The VistA Fee Separation of Duties project will enhance the VistA Fee Basis package by adding new security keys, modifying the locks on existing functionality, enforcing business rules, and auditing changes to selected data. The purpose of these enhancements is to address a tasking from the Government Accountability Office (GAO) regarding Access Controls and Separation of Duties.

The intended audience for this document includes the Office of Enterprise Development (OED), Chief Business Office (CBO) Purchased Care, users of VistA Fee Basis application and the VA OI&T Health Administration Product Enhancements (HAPE) Portfolio Management Office (PMO).

1.2. Scope

The scope of this project is limited to changes to the Fee Basis package. Fee Basis is a Veteran's Health Information Systems and Technology Architecture (VistA) package.

According to the 2008 VistA / HealtheVet Monograph, the Fee Basis package...“supports VHA's Non-VA Medical Care Program (NVC) (Fee for Service) program, which is care authorized for Veterans who are legally eligible and are in need of care that cannot feasibly be provided by a VA facility. A VA facility unable to meet the patient care requirements of a Veteran may authorize Non-VA Medical Care for short-term care, ongoing outpatient care, or home health care from Non-VA Health Care facilities. Bills for service are then submitted to the authorizing VA facility. The bill is reviewed by the facility and certified for payment through VA's payment center in Austin, Texas.”

Fee Basis Claims System (FBCS), a COTS product, which sits on top of VistA Fee, will require corresponding updates to support full compliance of the GAO Separation of Duties requirement. The updates to FBCS will be addressed as a separate project, independent of the VistA change.

1.3. References

<i>Item</i>	<i>Title</i>	<i>Link</i>
Project Notebook	VistA Fee Separation of Duties	[REDACTED]
BRD	VistA Fee Separation of Duties Business Requirements Document	[REDACTED]
User Manual	Fee Basis User Manual	[REDACTED]

Technical Manual	Fee Basis Technical Manual	
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2. Overall Description

These sections outline the overall accessibility specifications, design constraints, and requirements related to the operation of the VistA Fee Separation of Duties project.

2.1. Accessibility Specifications

All Specifications included in this RSD and their corresponding project implementation are intended to comply with all necessary 508 Compliance standards currently implemented in VistA Fee Basis.

2.2. Business Rules Specification

BN 1: Adhere to the Enterprise Level requirements within the Enterprise Requirements Repository (ERR).

BN2: Ensure the Fee Basis Module of VA's VistA software application supports separation of duties by including 2 new levels of Security Keys along with additional controls embedded in Fee Basis option functionality.

BN3 - The capability to store historical information in NVC records of the Fee Basis Module of VA's VistA software application. This is needed in order to maintain complete records on actions for accounting, information integrity and control.

2.3. Design Constraints Specification

The software changes contained in this RSD are moderate change to a mature legacy system. No requirement specifications in this document will change the existing software baseline standards such as development or target software languages, platform, performance characteristics, system loading, GUIs, existing entries to Data Dictionaries (other than add new entries as documented), "Look and Feel" or MMI (Man-Machine Interface) Standards, or Programming Standards in the VistA Fee Basis package.

2.4. Disaster Recovery Specification

There are no disaster recovery requirements specific to this development effort. The affected modules are integrated parts of the overall VistA system that exists at each site and will be subject to the normal backup and recovery procedures already defined by the Standard Operating Procedures (SOPs) of each facility.

2.5. Documentation Specifications

Updates to the Fee Basis User Manual and Technical Manual must comply with VA documentation Standards which include:

- Approved Applications Abbreviations
- Displaying Sensitive Data Guide

- End-User Documentation Standards
- User Documentation Template
- Electronic and Information Technology Accessibility Standards (Section 508) Webpage

Functional Documentation Changes will be required for both specific Modules and Processes that are intended to be modified by the Requirements Specifications within this document. Those Documentation Changes will consist of updated versions of user documentation (User Manuals, Technical Guides, etc.), help systems, help about notices, installation guides, security guides, implementation guides and/or other forms of documentation.

2.6. Functional Specifications

2.6.1. Revise security keys and locks and enforce business rules (FB*3.5*154)

The project will create new security keys and revise the locks on existing functionality and menu options to enhance the separation of duty controls. The project will also modify the software to enforce segregation of duty business rules.

Four requirements are obsolete (2.6.1.2.57, 2.6.1.4.7, 2.6.1.4.37, and 2.6.1.6.40). Under development patch FB*3.5*123 will delete the C&P/Multiple Patient Payment Entry [FBAA C&P ENTER PAYMENT] option.

2.6.1.1 Security Keys

2.6.1.1.1 Security key FBAA LEVEL 1 AUTH shall be added to the software with a description similar to the following text:

Permits the holder to enter and edit 7079 authorizations, 7078 authorizations, civil hospital notifications, nursing home movements, and unauthorized claims.

2.6.1.1.2 Security key FBAA LEVEL 1 PMT shall be added to the software with a description similar to the following text:

Permits the holder to enter and edit invoices and payments.

2.6.1.1.3 Security key FBAA LEVEL 2 shall be added to the software with a description similar to the following text:

Permits the holder to certify a batch for payment, queue data for transmission to Central FEE, void payments, and update contract and rate data for nursing home vendors. The holder of this key can also bypass some user and status restrictions during selection of a payment or batch. This key is normally assigned to a lead clerk or supervisor.

2.6.1.1.4 The description of existing security key FBAASUPERVISOR shall be changed from
 “This key provides the capability to Certify a Batch for Payment in the Fee Basis system.”

To a description similar to the following text

“Permits the holder to edit site parameters, maintain the VA fee schedule, edit the contract file, reprocess an overdue batch, resend a completed batch, re-transmit MRAs, and purge MRAs. This key is normally assigned to a supervisor.”

2.6.1.2 Revise locks on menu options

Menu options can be locked by a security key. A locked option can only be accessed by users that hold the applicable security key. The options listed below shall be revised by locking them with the security key in the Lock column. The Old Lock column contains the current lock where applicable. In a few cases the Old Lock contains a key followed by a routine name. In those cases the menu option itself is not locked, but the routine called by the option requires that the user hold the key to continue.

The options are grouped by menu. Options that are attached to multiple menus will be listed more than once, but the second and subsequent listing of such options will repeat the requirement number of the first occurrence followed by an asterisk.

Menu Option	Lock	Old Lock
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Civil Hospital Main Menu		
2.6.1.2.1 Queue Data for Transmission	FBAA LEVEL 2	FBAASUPERVISOR
Notification/Request Menu		
2.6.1.2.2 Legal Entitlement	FBAA LEVEL 1 AUTH	
2.6.1.2.3 Medical Entitlement	FBAA LEVEL 1 AUTH	
2.6.1.2.4 Delete Notification/Request	FBAA LEVEL 1 AUTH	
2.6.1.2.5 Reconsider a Denied Request	FBAA LEVEL 2	FBAASUPERVISOR
Disposition Menu		
2.6.1.2.6 Complete 7078/Authorization	FBAA LEVEL 1 AUTH	
2.6.1.2.7 Edit Completed 7078	FBAA LEVEL 1 AUTH	
2.6.1.2.8 Cancel 7078 Entered in Error	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.9 Print List of Cancelled 7078	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.10 Set-up a 7078	FBAA LEVEL 1 AUTH	
Payment Process Menu		
2.6.1.2.11 Ancillary Contract Hosp/CNH Payment	FBAA LEVEL 1 PMT	
2.6.1.2.12 Complete a Payment	FBAA LEVEL 1 PMT	
2.6.1.2.13 Delete Inpatient Invoice	FBAA LEVEL 1 PMT	
2.6.1.2.14 Edit Ancillary Payment	FBAA LEVEL 1 PMT	
2.6.1.2.15 Enter Invoice/Payment	FBAA LEVEL 1 PMT	
2.6.1.2.16 Invoice Edit	FBAA LEVEL 1 PMT	
2.6.1.2.17 Multiple Ancillary Payments	FBAA LEVEL 1 PMT	
2.6.1.2.18 Patient Reimbursement for Ancillary Services	FBAA LEVEL 1 PMT	

2.6.1.2.19 Reimbursement for Inpatient Hospital Invoice
FBAA LEVEL 1 PMT

Menu Option	Lock	Old Lock

Batch Main Menu - CH		
2.6.1.2.20 Open a Batch	FBAA LEVEL 1 PMT	
2.6.1.2.21 Edit Batch data	FBAA LEVEL 1 PMT	
2.6.1.2.22 Close-out Batch	FBAA LEVEL 1 PMT	
2.6.1.2.23 Re-open Batch	FBAA LEVEL 1 PMT	
2.6.1.2.24 Pricer Batch Release	FBAA LEVEL 1 PMT	
2.6.1.2.25 Re-initiate Pricer Rejected Items	FBAA LEVEL 1 PMT	
2.6.1.2.26 Release a Batch	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.27 Re-initiate Rejected Payment Items	FBAA LEVEL 1 PMT	
2.6.1.2.28 Batch Delete	FBAA LEVEL 1 PMT	
2.6.1.2.29 Open Ancillary Payment Batch	FBAA LEVEL 1 PMT	
Community Nursing Home Main Menu		
2.6.1.2.1* Queue Data for Transmission	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.30 Update Vendor Contract/Rates - CNH	FBAA LEVEL 2	
Authorization Main Menu - CNH		
2.6.1.2.31 Enter CNH Authorization	FBAA LEVEL 1 AUTH	
2.6.1.2.32 Edit CNH Authorization	FBAA LEVEL 1 AUTH	
2.6.1.2.33 Cancel Authorization Entered in Error	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.34 Change Existing Contract Rate for a Patient	FBAA LEVEL 1 AUTH	
2.6.1.2.35 Delete CNH Rate	FBAA LEVEL 2	
2.6.1.2.36 Enter Veteran Rates under new Vendor Contract	FBAA LEVEL 1 AUTH	
2.6.1.2.9* Print List of Cancelled 7078	FBAA LEVEL 2	FBAASUPERVISOR
Batch Main Menu - CNH		
2.6.1.2.28* Batch Delete	FBAA LEVEL 1 PMT	
2.6.1.2.22* Close-out Batch	FBAA LEVEL 1 PMT	
2.6.1.2.21* Edit Batch data	FBAA LEVEL 1 PMT	
2.6.1.2.37 Open CNH Batch	FBAA LEVEL 1 PMT	
2.6.1.2.27* Re-initiate Rejected Payment Items	FBAA LEVEL 1 PMT	
2.6.1.2.23* Re-open Batch	FBAA LEVEL 1 PMT	
2.6.1.2.26* Release a Batch	FBAA LEVEL 2	FBAASUPERVISOR
Fee Fund Control Main Menu - CNH		
2.6.1.2.38 Estimate Funds for Obligation	FBAA LEVEL 1 AUTH	
2.6.1.2.39 Post Commitments for Obligation	FBAA LEVEL 1 AUTH	
Movement Main Menu - CNH		
2.6.1.2.40 Admit To CNH	FBAA LEVEL 1 AUTH	
2.6.1.2.41 Delete Movement Menu	FBAA LEVEL 1 AUTH	
2.6.1.2.42 Discharge From CNH	FBAA LEVEL 1 AUTH	
2.6.1.2.43 Edit Movement Menu	FBAA LEVEL 1 AUTH	
2.6.1.2.44 Transfer Movement	FBAA LEVEL 1 AUTH	
Delete Movement Menu		
2.6.1.2.45 Admission Delete	FBAA LEVEL 1 AUTH	
2.6.1.2.46 Discharge Delete	FBAA LEVEL 1 AUTH	
2.6.1.2.47 Transfer Delete	FBAA LEVEL 1 AUTH	
Edit Movement Menu		
2.6.1.2.48 Admission Edit	FBAA LEVEL 1 AUTH	
2.6.1.2.49 Discharge Edit	FBAA LEVEL 1 AUTH	
2.6.1.2.50 Transfer Edit	FBAA LEVEL 1 AUTH	

Menu Option	Lock	Old Lock

Payment Main Menu - CNH		
2.6.1.2.13* Delete Inpatient Invoice	FBAA LEVEL 1 PMT	
2.6.1.2.51 Edit CNH Payment	FBAA LEVEL 1 PMT	
2.6.1.2.52 Enter CNH Payment	FBAA LEVEL 1 PMT	
Medical Fee Main Menu		
2.6.1.2.53 Enter Authorization	FBAA LEVEL 1 AUTH	
2.6.1.2.54 Terminate ID Card	FBAA LEVEL 1 AUTH	
Batch Main Menu		
2.6.1.2.28* Batch Delete	FBAA LEVEL 1 PMT	
2.6.1.2.22* Close-out Batch	FBAA LEVEL 1 PMT	
2.6.1.2.21* Edit Batch data	FBAA LEVEL 1 PMT	
2.6.1.2.55 Open a Batch	FBAA LEVEL 1 PMT	
2.6.1.2.23* Re-open Batch	FBAA LEVEL 1 PMT	
2.6.1.2.26* Release a Batch	FBAA LEVEL 2	FBAASUPERVISOR
Outputs Main Menu		
2.6.1.2.56 Group 7079 Print	FBAA LEVEL 2	FBAASUPERVISOR
Payment menu		
2.6.1.2.57 C&P/Multiple Patient Payment Entry	FBAA LEVEL 1 PMT	
2.6.1.2.58 Delete Payment Entry	FBAA LEVEL 1 PMT	
2.6.1.2.59 Edit Payment	FBAA LEVEL 1 PMT	
2.6.1.2.60 Enter Payment	FBAA LEVEL 1 PMT	
2.6.1.2.61 Multiple Payment Entry	FBAA LEVEL 1 PMT	
2.6.1.2.27* Re-initiate Rejected Payment Items	FBAA LEVEL 1 PMT	
2.6.1.2.62 Reimbursement Payment Entry	FBAA LEVEL 1 PMT	
2.6.1.2.63 Travel Payment Only	FBAA LEVEL 1 PMT	
Supervisor Main Menu		
2.6.1.2.64 Clerk Look-Up For An Authorization	FBAASUPERVISOR	FBAASUPERVISOR by FBAACLU
2.6.1.2.65 Enter/Edit Suspension Letters	FBAASUPERVISOR	
2.6.1.2.66 Edit Pharmacy Invoice Status	FBAA LEVEL 2	
2.6.1.2.67 Fee Basis 1358 Segregation of Duty Report	FBAASUPERVISOR	
2.6.1.2.24* Pricer Batch Release	FBAA LEVEL 1 PMT	
2.6.1.2.1* Queue Data for Transmission	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.27* Re-initiate Rejected Payment Items	FBAA LEVEL 1 PMT	
2.6.1.2.26* Release a Batch	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.68 Void Payment Main Menu	FBAA LEVEL 2	
Fee Schedule Main Menu (under Supervisor Main Menu)		
2.6.1.2.69 Add/Edit Fee Schedule	FBAASUPERVISOR	
2.6.1.2.70 Compile Fee Schedule	FBAASUPERVISOR	
FPPS Update & Transmit Menu (under Supervisor Main Menu)		
2.6.1.2.71 Outpatient/Ancillary Invoice Edit	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.72 Pharmacy Invoice Edit	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.73 Inpatient Invoice Edit	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.74 Purge Message Text	FBAA LEVEL 2	FBAASUPERVISOR
MRA Main Menu (under Supervisor Main Menu)		
2.6.1.2.75 Vendor MRA Main Menu	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.76 Veteran MRA Main Menu	FBAA LEVEL 2	

Menu Option	Lock	Old Lock

Vendor MRA Main Menu (under MRA Main Menu)		
2.6.1.2.77 Update FMS Vendor File in Austin	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.78 Delete Vendor MRA	FBAA LEVEL 2	FBAASUPERVISOR
2.6.1.2.79 Reinstate Vendor MRA	FBAA LEVEL 2	
2.6.1.2.80 MRA'S Awaiting Austin Approval	FBAA LEVEL 2	
Veteran MRA Main Menu (under MRA Main Menu)		
2.6.1.2.81 Add type Veteran MRA	FBAA LEVEL 2	
2.6.1.2.82 Change type Veteran MRA	FBAA LEVEL 2	
2.6.1.2.83 Delete type Veteran MRA	FBAA LEVEL 2	
2.6.1.2.84 Reinstate type Veteran MRA	FBAA LEVEL 2	
Unauthorized Claims File Menu (under Supervisor Main Menu)		
2.6.1.2.85 Add New Person for Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.86 Disapproval Reasons File Enter/Edit	FBAASUPERVISOR	
2.6.1.2.87 Dispositions File Edit	FBAASUPERVISOR	
2.6.1.2.88 Request Info File Enter/Edit	FBAASUPERVISOR	
Void Payment Main Menu (under Supervisor Main Menu)		
2.6.1.2.89 CH Delete Void Payment	FBAA LEVEL 2	FBAASUPERVISOR by FBCHVP
2.6.1.2.90 CH Void Payment	FBAA LEVEL 2	FBAASUPERVISOR by FBCHVP
2.6.1.2.91 CNH Delete Void Payment	FBAA LEVEL 2	FBAASUPERVISOR by FBCHVP
2.6.1.2.92 CNH Void Payment	FBAA LEVEL 2	FBAASUPERVISOR by FBCHVP
2.6.1.2.93 Medical Delete Void Payment	FBAA LEVEL 2	FBAASUPERVISOR by FBAAVP
2.6.1.2.94 Medical Void Payment	FBAA LEVEL 2	FBAASUPERVISOR by FBAAVP
2.6.1.2.95 Pharmacy Delete Void Payment	FBAA LEVEL 2	FBAASUPERVISOR by FBAAPHV
2.6.1.2.96 Pharmacy Void Payment	FBAA LEVEL 2	FBAASUPERVISOR by FBAAPHV
Pharmacy Fee Main Menu		
2.6.1.2.97 Closeout Pharmacy Invoice	FBAA LEVEL 1 PMT	
2.6.1.2.98 Complete Pharmacy Invoice	FBAA LEVEL 1 PMT	
2.6.1.2.99 Edit Pharmacy Invoice	FBAA LEVEL 1 PMT	
2.6.1.2.100 Enter Pharmacy Invoice	FBAA LEVEL 1 PMT	
2.6.1.2.101 Patient Re-imbursement	FBAA LEVEL 1 PMT	
Batch Menu - Pharmacy		
2.6.1.2.28* Batch Delete	FBAA LEVEL 1 PMT	
2.6.1.2.22* Close-out Batch	FBAA LEVEL 1 PMT	
2.6.1.2.21* Edit Batch data	FBAA LEVEL 1 PMT	
2.6.1.2.102 Open a Pharmacy Batch	FBAA LEVEL 1 PMT	
2.6.1.2.23* Re-open Batch	FBAA LEVEL 1 PMT	
2.6.1.2.26* Release a Batch	FBAA LEVEL 2	FBAASUPERVISOR
State Home Main Menu		
2.6.1.2.103 Enter New State Home Authorization	FBAA LEVEL 1 AUTH	
2.6.1.2.104 Change a State Home Authorization	FBAA LEVEL 1 AUTH	
2.6.1.2.105 Delete a State Home Authorization	FBAA LEVEL 1 AUTH	
2.6.1.2.106 Reinstate State Home Authorization	FBAA LEVEL 1 AUTH	

Menu Option	Lock	Old Lock

Unauthorized Claim Main Menu		
2.6.1.2.107 Request Information on Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.108 Receive Requested Information	FBAA LEVEL 1 AUTH	
2.6.1.2.109 Letters for Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.110 Payments for Unauthorized Claims	FBAA LEVEL 1 PMT	
Enter/Edit Unauthorized Claim Menu		
2.6.1.2.111 Enter Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.112 Modify Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.113 Disposition Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.114 Re-open Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.115 Initiate Appeal for Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.116 Appeal Edit for Unauthorized Claim	FBAA LEVEL 2	
2.6.1.2.117 COVA Appeal Enter/Edit	FBAA LEVEL 2	
Letters for Unauthorized Claim		
2.6.1.2.118 Update Date Letter Sent	FBAA LEVEL 1 AUTH	
2.6.1.2.119 Batch Print Letters	FBAA LEVEL 1 AUTH	
2.6.1.2.120 Reprint Letter(s)	FBAA LEVEL 1 AUTH	
Utilities for Unauthorized Claims		
2.6.1.2.87* Add New Person for Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.121 Associate an Unauthorized Claim to a Primary	FBAA LEVEL 1 AUTH	
2.6.1.2.122 Disassociate an Unauthorized Claim	FBAA LEVEL 1 AUTH	
2.6.1.2.123 Return Address Display/Edit	FBAA LEVEL 2	

2.6.1.3 Attach menu options to additional menus

Several options that are attached to the Supervisor Main Menu will be attached to additional menus.

2.6.1.3.1 The Delete reject flag option shall be attached to the Batch Main Menu within the Medical Fee Main Menu.

2.6.1.3.2 The Delete reject flag option shall be attached to the Batch Menu – Pharmacy within the Pharmacy Fee Main Menu.

2.6.1.3.3 The Finalize a Batch option shall be attached to the Batch Main Menu within the Medical Fee Main Menu.

2.6.1.3.4 The Finalize a Batch option shall be attached to the Batch Menu – Pharmacy within the Pharmacy Fee Main Menu.

2.6.1.3.5 The List Batches Pending Release option shall be attached to the Batch Main Menu within the Medical Fee Main Menu.

2.6.1.3.6 The List Batches Pending Release option shall be attached to the Batch Menu – Pharmacy within the Pharmacy Fee Main Menu.

2.6.1.3.7 The List Batches Pending Release option shall be attached to the Batch Main Menu - CH within the Civil Hospital Main Menu.

2.6.1.4 Revise locks on functionality within menu options

A number of menu options prevent selection of a payment batch where the user does not match the CLERK WHO OPENED field of the batch unless the user holds the FBAASUPERVISOR security key. The following options shall be modified to check if the user holds the FBAA LEVEL 2 security key instead of checking if the user holds the FBAASUPERVISOR security key during batch selection.

2.6.1.4.1 Edit Batch data [FBAA BATCH EDIT]

2.6.1.4.2 Close-out Batch [FBAA CLOSE BATCH]

2.6.1.4.3 Re-open Batch [FBAA REOPEN BATCH]

2.6.1.4.4 Batch Delete [FBAA BATCH DELETE]

2.6.1.4.5 Enter Payment [FBAA ENTER PAYMENT]

2.6.1.4.6 Multiple Payment Entry [FBAA MULTIPLE PAYMENT ENTRY]

~~2.6.1.4.7 C&P/Multiple Patient Payment Entry [FBAA C&P ENTER PAYMENT]~~

2.6.1.4.8 Reimbursement Payment Entry [FBAA MEDICAL REIMBURSEMENT]

2.6.1.4.9 Ancillary Contract Hosp/CNH Payment [FBCH ANCILLARY PAYMENT]

2.6.1.4.10 Multiple Ancillary Payments [FBCH MULTIPLE PAYMENTS]

2.6.1.4.11 Patient Reimbursement for Ancillary Services [FBCH ANCILLARY REIMBURSEMENT]

2.6.1.4.12 Payments for Unauthorized Claims [FBUC PAYMENTS]

2.6.1.4.13 Delete Payment Entry [FBAA DELETE PAYMENT]

2.6.1.4.14 Complete a Payment [FBCH COMPLETE PAYMENT]

2.6.1.4.15 Re-initiate Pricer Rejected Items [FBCH REINITIATE PRICER REJECTS]

2.6.1.4.16 Delete Inpatient Invoice [FBCH DELETE INVOICE]

2.6.1.4.17 Invoice Edit [FBCH EDIT PAYMENT]

2.6.1.4.18 Edit CNH Payment [FBCNH EDIT PAYMENT]

The following menu option allows the user to select a batch with a status of REVIEWED AFTER PRICER or SUPERVISOR CLOSED if the FBAASUPERVISOR security key is held:

The option shall be modified to check if the user holds the FBAA LEVEL 2 security key instead of checking if the user holds the FBAASUPERVISOR security key.

2.6.1.4.19 Delete Inpatient Invoice [FBCH DELETE INVOICE]

The following menu options allow the user to select a batch with a status of CLERK CLOSED, FORWARDED TO PRICER, REVIEWED AFTER PRICER, or SUPERVISOR CLOSED if the FBAASUPERVISOR security key is held: These options shall be modified to instead check if the user holds the FBAA LEVEL 2 security key.

2.6.1.4.20 Invoice Edit [FBCH EDIT PAYMENT]

2.6.1.4.21 Edit CNH Payment [FBCNH EDIT PAYMENT]

The following menu options restrict the edit to the CLERK who entered the payment unless the FBAASUPERVISOR key is held: These options shall be modified to instead check if the user holds the FBAA LEVEL 2 security key.

2.6.1.4.22 Edit Payment [FBAA EDIT PAYMENT]

2.6.1.4.23 Edit Ancillary Payment [FBCH EDIT ANCILLARY PAYMENT]

The following menu options prevent the edit if the payment is in a batch with status SUPERVISOR CLOSED unless the FBAASUPERVISOR key is held. These options shall be modified to instead check if the user holds the FBAA LEVEL 2 security key.

2.6.1.4.24 Edit Payment [FBAA EDIT PAYMENT]

2.6.1.4.25 Edit Ancillary Payment [FBCH EDIT ANCILLARY PAYMENT]

The following menu option prevents the edit of a pharmacy invoice if the status of the invoice is COMPLETED unless the FBAASUPERVISOR key is held. This option shall be changed to instead check if the user holds the FBAA LEVEL 2 security key.

2.6.1.4.26 Edit Pharmacy Invoice [FBAA EDIT PHARMACY INVOICE]

The following menu option prevents the edit of a prescription within the invoice if the prescription is in a batch with status SUPERVISOR CLOSED unless the FBAASUPERVISOR key is held. This option shall be changed to instead check if the user holds the FBAA LEVEL 2 security key.

2.6.1.4.27 Edit Pharmacy Invoice [FBAA EDIT PHARMACY INVOICE]

The following menu options limit the list of pending 7078s to those with the user as the USER ENTERING of the 7078 unless the FBAASUPERVISOR key is held: These options shall be changed to instead check if the user holds the FBAA LEVEL 2 security key.

2.6.1.4.28 Civil Hospital Main Menu [FBCH MAIN MENU]

2.6.1.4.29 Request Statistics [FBCH REQUEST STATS]

The following menu option restricts the selection of a notification/request to the USER ENTERING NOTIFICATION unless the FBAASUPERVISOR key is held. This option shall be changed to instead check if the user holds the FBAA LEVEL 2 security key.

2.6.1.4.30 Delete Notification/Request [FBCH DELETE REQUEST]

The ability to update contract and rate data for a community nursing home vendor shall be locked with the FBAA LEVEL 2 security key. The following options shall be modified to check if user holds the security key before allowing the contract and rate data to be updated :

2.6.1.4.31 Vendor Enter/Edit

2.6.1.4.32 Display,Enter,Edit Demographics

2.6.1.4.33 If the Transmit Invoices to FPPS option is invoked from the menu by a user (i.e. interactively) then the system shall require the user hold the FBAA LEVEL 2 security key to proceed.

2.6.1.4.34 If the Transmit Invoices to FPPS option is invoked by a scheduled task (i.e. non-interactively) then the system shall NOT require that the scheduler to hold the FBAA LEVEL 2 security key.

The following menu options do not allow the user to enter an amount paid that exceeds the calculated fee schedule amount unless the user holds the FBAASUPERVISOR key. Note: Under development patch FB*3.5*143 will modify the software to also allow a user that holds the FBAASUPERVISOR key to enter an amount paid that exceeds the amount claimed. These options shall be modified by removing the requirement that a user hold the FBAASUPERVISOR security key to enter an amount paid that exceeds the fee schedule amount or amount claimed.

2.6.1.4.35 Enter Payment [FBAA ENTER PAYMENT]

2.6.1.4.36 Multiple Payment Entry [FBAA MULTIPLE PAYMENT ENTRY]

~~2.6.1.4.37 C&P/Multiple Patient Payment Entry [FBAA C&P ENTER PAYMENT]~~

2.6.1.4.38 Reimbursement Payment Entry [FBAA MEDICAL REIMBURSEMENT]

2.6.1.4.39 Ancillary Contract Hosp/CNH Payment [FBCH ANCILLARY PAYMENT]

2.6.1.4.40 Multiple Ancillary Payments [FBCH MULTIPLE PAYMENTS]

2.6.1.4.41 Patient Reimbursement for Ancillary Services [FBCH ANCILLARY REIMBURSEMENT]

2.6.1.4.42 Payments for Unauthorized Claims [FBUC PAYMENTS]

2.6.1.4.43 Edit Payment [FBAA EDIT PAYMENT]

2.6.1.4.44 Edit Ancillary Payment [FBCH EDIT ANCILLARY PAYMENT]

2.6.1.5 Create user access report

A new report of users that hold a Fee Basis security key will be created.

2.6.1.5.1 The menu option shall be called Security Key Report for Fee Basis.

2.6.1.5.2 The menu option shall be locked by the FBAASUPERVISOR security key.

2.6.1.5.3 The menu option shall be attached to the Supervisor Main Menu.

2.6.1.5.4 The report shall allow the user to specify if the results should be sorted by security key or by person.

2.6.1.5.5 If the sort is by security key the report shall allow the user to select one, many, or all of the security keys within the FB namespace.

2.6.1.5.6 If the sort is by security key the results shall show the selected security keys and each person that holds the security key.

2.6.1.5.7 If the sort is by person the report shall allow the user to select one, many, or all persons.

2.6.1.5.8 If the sort is by person and all persons were selected the results shall only include those persons that hold a security key in the FB namespace.

2.6.1.5.9 If the sort is by person and specific persons were selected the results shall show each person and the security keys within the FB namespace that they hold.

2.6.1.5.10 The report shall display the name, last 4 of the SSN, title, and division(s) for each person listed in the results.

2.6.1.6 Prevent entry of payment or pricing if user entered authorization

The system will be modified to prevent a user from entering payment or pricing for a service if that user previously entered or edited the associated authorization for the service. Entry or edit of a civil hospital notification, community nursing home contract rate for a patient, community nursing home movement, or unauthorized claim will be considered as a change to the associated authorization.

Note: The system is not being modified to prevent a user from editing an existing authorization if the user previously entered a payment that is associated with the authorization. However, once the authorization has been edited the user will no longer be able to process payments associated with the authorization.

The site parameter EDIT AUTH. DURING PAYMENT shall be disabled to prevent modification of the authorization during payment entry. This modification will impact the following menu options:

- 2.6.1.6.1 Site Parameter Enter/Edit option
- 2.6.1.6.2 Enter Payment
- 2.6.1.6.3 Multiple Payment Entry
- 2.6.1.6.4 Reimbursement Payment Entry
- 2.6.1.6.5 Travel Payment Only
- 2.6.1.6.6 Ancillary Contract Hosp/CNH Payment
- 2.6.1.6.7 Multiple Ancillary Payments
- 2.6.1.6.8 Patient Reimbursement for Ancillary Service

The following menu options shall be modified to maintain a list of all users that enter or edit an unauthorized claim.

- 2.6.1.6.9 Enter Unauthorized Claim
- 2.6.1.6.10 Modify Unauthorized Claim
- 2.6.1.6.11 Disposition Unauthorized Claim
- 2.6.1.6.12 Re-open Unauthorized Claim
- 2.6.1.6.13 Initiate Appeal for Unauthorized Claim
- 2.6.1.6.14 Appeal Edit for Unauthorized Claim
- 2.6.1.6.15 COVA Appeal Enter/Edit

The following menu options shall be modified to maintain a list of all users that enter or edit a civil hospital notification.

- 2.6.1.6.16 Enter a Request/Notification
- 2.6.1.6.17 Notification/Request Edit
- 2.6.1.6.18 Legal Entitlement
- 2.6.1.6.19 Medical Entitlement
- 2.6.1.6.20 Reconsider a Denied Request

The following menu options shall be modified to maintain a list of all users that enter or edit a 7078 civil hospital authorization.

- 2.6.1.6.21 Legal Entitlement
- 2.6.1.6.22 Medical Entitlement

- 2.6.1.6.23 Set-up a 7078
- 2.6.1.6.24 Complete 7078/Authorization
- 2.6.1.6.25 Edit Completed 7078

The following menu options shall be modified to maintain a list of all users that enter or edit a 7078 nursing home authorization.

- 2.6.1.6.26 Enter CNH Authorization
- 2.6.1.6.27 Edit CNH Authorization
- 2.6.1.6.28 Change Existing Contract Rate for a Patient
- 2.6.1.6.29 Enter Veteran Rates under new Vendor Contract
- 2.6.1.6.30 Admit To CNH
- 2.6.1.6.31 Discharge From CNH
- 2.6.1.6.32 Transfer Movement
- 2.6.1.6.33 Admission Delete
- 2.6.1.6.34 Discharge Delete
- 2.6.1.6.35 Transfer Delete
- 2.6.1.6.36 Admission Edit
- 2.6.1.6.37 Discharge Edit
- 2.6.1.6.38 Transfer Edit

The following menu option shall be modified to maintain a list of all users that enter or edit the 7079 authorization.

- 2.6.1.6.39 Enter Authorization

The following menu options shall not allow a user to enter or edit an invoice/payment if the user previously entered or edited the associated authorization.

- ~~2.6.1.6.40 C&P/Multiple Patient Payment Entry~~
- 2.6.1.6.41 Delete Payment Entry
- 2.6.1.6.42 Edit Payment
- 2.6.1.6.43 Enter Payment
- 2.6.1.6.44 Multiple Payment Entry
- 2.6.1.6.45 Re-initiate Rejected Payment Items
- 2.6.1.6.46 Reimbursement Payment Entry

- 2.6.1.6.47 Travel Payment Only
- 2.6.1.6.48 Ancillary Contract Hosp/CNH Payment
- 2.6.1.6.49 Complete a Payment
- 2.6.1.6.50 Delete Inpatient Invoice
- 2.6.1.6.51 Edit Ancillary Payment
- 2.6.1.6.52 Enter Invoice/Payment
- 2.6.1.6.53 Invoice Edit
- 2.6.1.6.54 Multiple Ancillary Payments
- 2.6.1.6.55 Patient Reimbursement for Ancillary Services
- 2.6.1.6.56 Reimbursement for Inpatient Hospital Invoice
- 2.6.1.6.57 Re-initiate Pricer Rejected Items
- 2.6.1.6.58 Delete Inpatient Invoice
- 2.6.1.6.59 Edit CNH Payment
- 2.6.1.6.60 Enter CNH Payment
- 2.6.1.6.61 Closeout Pharmacy Invoice
- 2.6.1.6.62 Complete Pharmacy Invoice
- 2.6.1.6.63 Edit Pharmacy Invoice
- 2.6.1.6.64 Enter Pharmacy Invoice
- 2.6.1.6.65 Patient Re-imburement
- 2.6.1.6.66 Payments for Unauthorized Claims

The following option shall be modified to no longer allow a user to select the daily rate for periods that do not have a rate defined.

2.6.1.6.67 Enter CNH Payment

2.6.1.6.68 The list of users that entered or edited an unauthorized claim shall include an entry based on the ENTERED/LAST EDITED BY (#27) and the DATE ENTERED/LAST EDITED (#28) fields of the FEE BASIS UNAUTHORIZED CLAIMS (#162.7) file at the time the patch is initially installed.

2.6.1.6.69 The list of users that entered or edited a civil hospital notification shall include an entry based on the USER ENTERING NOTIFICATION (#7) field of the FEE NOTIFICATION/REQUEST (#162.2) file and the current date at the time the patch is initially installed.

2.6.1.6.70 The list of users that entered or edited a civil hospital notification shall include an entry based on the USER ENTERING LEGAL DETERM. (#10) and DATE OF LEGAL DETERMINATION (#9) fields of the FEE NOTIFICATION/REQUEST (#162.2) file at the time the patch is initially installed.

2.6.1.6.71 The list of users that entered or edited a civil hospital notification shall include an entry based on the USER ENTERING MEDICAL DETERM. (#13) and DATE OF MEDICAL DETERMINATION (#12) fields of the FEE NOTIFICATION/REQUEST (#162.2) file at the time the patch is initially installed.

2.6.1.6.72 The list of users that entered or edited a 7078 authorization shall include an entry based on the USER ENTERING (#8) and DATE OF ISSUE (#10) fields of the VA FORM 10-7078 (#162.4) file at the time the patch is initially installed.

2.6.1.6.73 The list of users that entered or edited a 7079 authorization shall include an entry based on the CLERK (#7) field of the AUTHORIZATION multiple of the FEE BASIS PATIENT (#161) file and the current date at the time the patch is initially installed.

2.6.1.7 Display users that entered or edited records.

The follow outputs will be created or modified to show users that entered or edited the specified records.

A new option will be created to list users that entered or edited a specified unauthorized claim.

2.6.1.7.1 The new option shall be called Clerk Lookup for Unauthorized Claim.

2.6.1.7.2 The new option shall be attached to the Outputs for Unauthorized Claims menu.

2.6.1.7.3 The new option shall be locked by the FBAASUPERVISOR security key.

2.6.1.7.4 The option shall list users that entered or edited a specified unauthorized claim. Requirements 2.6.1.6.9 through 2.6.1.6.15 describe the options that track the users.

A new option will be created to list users that entered or edited a specified civil hospital notification/request.

2.6.1.7.5 The new option shall be called Clerk Lookup for Notification/Request.

2.6.1.7.6 The new option shall be attached to the Notification/Request menu.

2.6.1.7.7 The new option shall be locked by the FBAASUPERVISOR security key.

2.6.1.7.8 The option shall list users that entered or edited a specified notification/request. Requirements 2.6.1.6.16 through 2.6.1.6.20 describe the options that track the users.

A new option will be created to list users that entered or edited a specified 7078 authorization.

2.6.1.7.9 The new option shall be called Clerk Lookup for 7078 Authorization.

2.6.1.7.10 The new option shall be attached to the Output Menu under the Civil Hospital Main Menu.

2.7.1.7.11 The new option shall be attached to the Output Main Menu – CNH under the Community Nursing Home Main Menu.

2.6.1.7.12 The new option shall be locked by the FBAASUPERVISOR security key.

2.6.1.7.13 The option shall list users that entered or edited a specified 7078 authorization. Requirements 2.6.1.6.21 through 2.6.1.6.38 describe the options that track the users.

An existing option will be updated to list users that entered or edited a specified authorization.

2.6.1.14 The Clerk Look-Up For An Authorization option located on the Supervisor Main Menu shall be updated to list all users that entered or edited the authorization.

2.6.2. Retain historical data (FB*3.5*151)

The project will enhance the Fee Basis package to retain historical data in order to maintain complete records on actions for accounting, information integrity and control.

2.6.2.1 Unauthorized Claim

2.6.2.1.1 Currently the date a request for additional information letter was sent is overwritten and lost when the disposition letter is sent because both dates are stored in the DATE LETTER SENT field. The system shall be modified to also store the date that a request for additional information letter is sent in a new data field called DATE REQ INFO SENT.

The system shall maintain a history of the following fields in the FEE BASIS UNAUTHORIZED CLAIMS file including the date and time changed, the old and new value, and the user that made the change.

2.6.2.1.2 STATUS (#24)

2.6.2.1.3 DISPOSITION (#10)

2.6.2.1.4 DATE CLAIM RECEIVED (#.01)

2.6.2.1.5 DATE REQ INFO SENT (# TBD)

2.6.2.1.6 DATE VALID CLAIM RECEIVED (#7)

2.6.2.1.7 DATE OF DISPOSITION (#11)

2.6.2.1.8 REOPEN CLAIM DATE (#21)

2.6.2.1.9 NOTICE OF DISAGREEMENT RECV'D (#50)

2.6.2.1.10 STATEMENT OF THE CASE ISSUED (#51)

2.6.2.1.11 DATE SUBSTANTIVE APPEAL RECV'D (#52)

2.6.2.1.12 DATE APPEAL DISPOSITIONED (#53)

2.6.2.1.13 DATE APPEALED TO COVA (#54)

2.6.2.1.14 DATE COVA APPEAL DISPOSITIONED (#55)

2.6.2.1.15 The Display Unauthorized Claim option shall be modified to allow a user to optionally display the history information for the tracked fields.

2.6.2.2 Civil Hospital Notification (EXISTING FUNTIONALITY)

The system currently maintains a history of the following fields in the FEE NOTIFICATION/REQUEST file including the date and time changed, the old and new value, and the user that made the change.

LEGAL ENTITLEMENT (#8)

MEDICAL ENTITLEMENT (#11)

The Print Entitlement Audit option currently displays history information.

2.6.2.2.1 The definition of legal entitlement and medical entitlement in the Fee Basis User Manual shall be updated. The National Non-VA Medical Care Program Office (NNPO) will provide appropriate text.

2.6.2.3 Authorization

The system shall maintain a history of the following fields in the AUTHORIZATION multiple of the FEE BASIS PATIENT file including the date and time changed, the old and new value, and the user that made the change.

2.6.2.3.1 FROM DATE (#.01)

2.6.2.3.2 TO DATE (#.02)

2.6.2.3.3 DISCHARGE TYPE (#.06)

2.6.2.3.4 PURPOSE OF VISIT CODE (#.07)

2.6.2.3.5 TREATMENT TYPE CODE (#.095)

Note: The authorization in the FEE BASIS PATIENT file is not created for a civil hospital authorization while the status is incomplete. Therefore the history of the FROM DATE will not be tracked for incomplete civil hospital authorizations.

A new option will be created to display the history information for a specified authorization.

2.6.2.3.6 A new option shall be created to display the history information for a specified authorization.

2.6.2.3.7 The option shall be attached to the Outputs Main Menu menu under the Medical Fee Main Menu.

2.6.3. Payment Reference to Authorization Issue (FB*3.5*154)

There is an existing problem with the association between a payment line item in the FEE BASIS PAYMENT (#162) file and authorization in the FEE BASIS PATIENT (#161) file. The associated authorization is stored in VistA Fee Basis based on the patient, vendor, and date of service for outpatient and inpatient ancillary payments. This is a problem if there are payments that should be associated with different authorizations, but those payments have the exact same patient, vendor, and date of service. This situation is common with home health services where there are separate authorizations for nursing and non-nursing services for a single patient and those services are provided to the patient by the same vendor on the same date. This existing software fault must be addressed so requirements in section 2.6.1.6 can be met by the menu options used to edit an existing an outpatient or inpatient ancillary payment.

The problem was reported on Remedy Ticket 726099

A fix for this issue was requested by new service request 20120609



2.7. Graphical User Interface (GUI) Specifications

VistA Fee Basis does not have a graphical user interface. This project does not create a graphical user interface.

2.8. Multi-divisional Specifications

VistA Fee Basis uses the PRIMARY SERVICE FACILITY field which is present in several key files as well as the IFCAP substation of a 1358 obligation associated with a payment batch to support multi-divisional VistA sites. This project does not introduce any changes to the existing support of multi-divisional VistA sites.

2.9. Performance Specifications

There are no known performance specifications for the existing software. This project will not materially impact the performance of the existing Fee Basis package. Changing which security key locks a menu or function will have no impact on performance. Capturing historical data for fee notifications and unauthorization claims will not have a significant impact on the system response to user edits of this data.

2.10. Quality Attributes Specification

This project will adhere to the standards in the Department of Veterans Affairs M Programming Standards and Conventions document.

2.11. Reliability Specifications

There are no reliability requirements specific to this development effort. The VistA Fee Basis module is an integrated part of the overall VistA system that exists at each site and will be subject to the normal reliability standards of the VistA system itself.

2.12. Scope Integration

Fee Basis is a part of the Veteran's Health Information Systems and Technology Architecture (VistA) software. Fee Basis is dependent on core VistA applications such as Kernel, FileMan, VA MailMan, for menu, database, user access functionality. Fee Basis is also dependent on other VistA packages such as IFCAP, Integrated Billing, and Registration. Fee Basis also interfaces with external systems such as Central FEE which is located at the Austin Information technology Center (AITC).

This project does not impact interface agreements between VistA Fee Basis and other software applications with the exception of the Fee Basis Claims System (FBCS).

Any impacts to the interface between VistA Fee Basis and FBCS as a result of these enhancements to VistA Fee Basis will be addressed by a separate but related FBCS project.

2.13. Security Specifications

This project is a minor enhancement to an existing software application. The project will add controls such as new security keys and auditing of selected data.

2.14. System Features

This project will add new reports to an existing software package. See section 2.6 Functional Specifications for details.

2.15. Usability Specifications

This project will adhere to the standards in the Department of Veterans Affairs M Programming Standards and Conventions document. This project will not significantly impact performance measures of typical tasks.

3. Applicable Standards

All standards that apply to the Fee Basis package are applicable to this software update. These include Software Quality assurance, Change Management, Configuration and Release Management, Risk Management processes as well as the technical standards included in the profile of the Fee Basis end user workstations, networking standards, data exchange protocols, and usability.

4. Interfaces

This project does not make any changes to existing interfaces. A separate, related FBCS project will make any necessary changes to the FBCS-VistA Fee Basis interface.

4.1. Communications Interfaces

There are no new or planned changes to the existing communications interfaces for the legacy systems to be modified.

4.2. Hardware Interfaces

There are no new or planned changes to the existing hardware interfaces for the legacy systems to be modified.

4.3. Software Interfaces

There are no new or planned changes to the existing software interfaces for the legacy systems to be modified.

4.4. User Interfaces

The existing roll-and-scroll user interface will be used with these enhancements.

5. Legal, Copyright, and Other Notices

All existing Legal, Copyright and Other Notices Remain Unchanged by this RSD and this Project.

6. Purchased Components

This RSD does not envision any requirement for purchased components. This Project is an internally-funded, non-contracted activity. No additional components or contracts are planned or known at this time.

6.1. Defect Source (TOP 5)

7. User Class Characteristics

The User Class Characteristics are unchanged and the intended Users will have the identical general characteristics of the existing Users of the product including educational level, experience, and technical expertise.

8. Estimation

Project Software Functional Size and Size-Based Effort and Duration Estimate

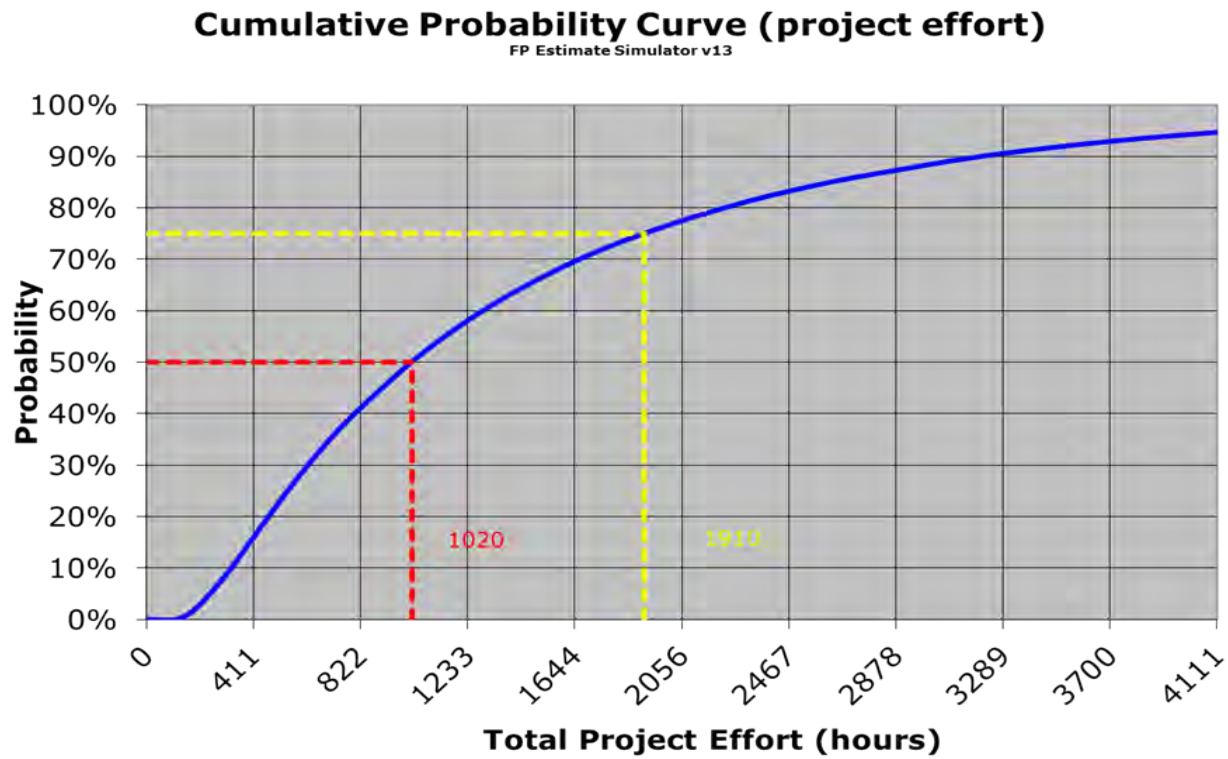
Application

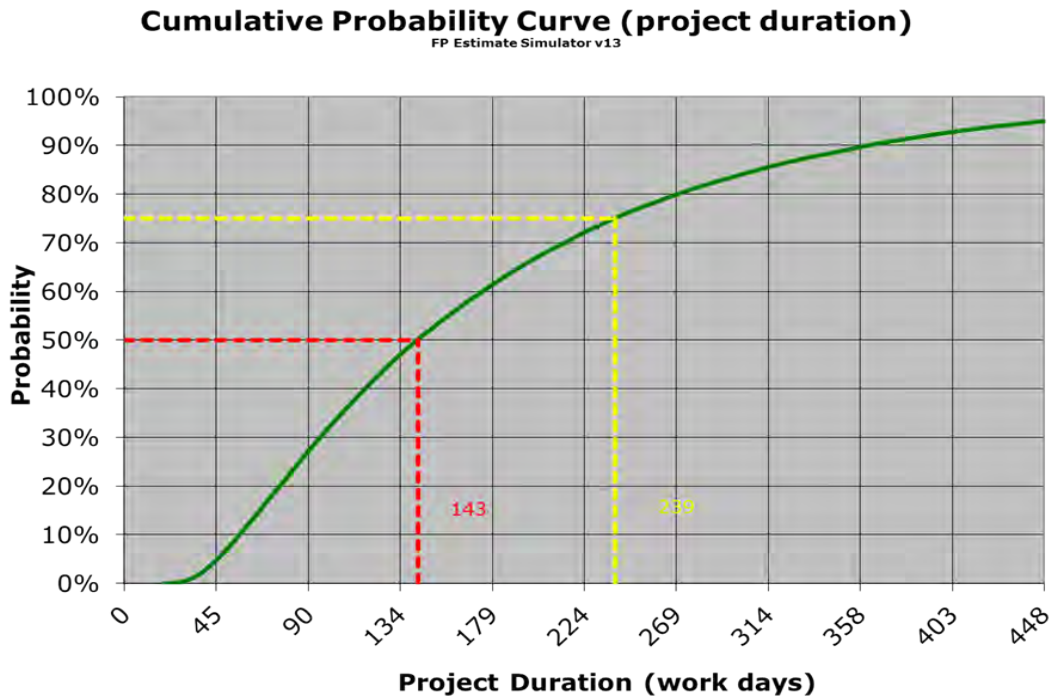
Item	A	B	C	D	E	Total
Counted Function Points	281					281
Estimated Scope Growth						
Estimated Size at Release	Min:211 Expected: 281 Max:365.3					Min:211 Expected: 281 Max:365.3

Size-Based Effort Estimates	Labor Hours	Probability
Low-Effort Estimate – With indicated probability, project will consume no more than:	1020	50%
High-Effort Estimate – With indicated probability, project will consume no more than:	1910	75%

Size-Based Duration Estimates	Work Days	Probability
Low-Duration Estimate – With indicated probability, project will consume no more than:	143	50%
High-Duration Estimate -- With indicated probability, project will consume no more than:	239	75%


Figure 1: Cumulative Probability (“S-curve”) Chart





9. Approval Signatures

REVIEW DATE: March 18, 2013

_____/es/_____


IPT Co-Chair, FBCS Project Manager, VACO



RE VisA Fee SOD RSD SDD - Concurrence.msg

_____/es/_____


IPT Co-Chair, FBCS Project Manager, VACO



RE Visa Fee SOD RSD SDD - Concurrence.msg

/es/



Business Sponsor



RE Visa Fee SOD RSD SDD - Concurrence.msg

/es/



IT Program Manager



RE Visa Fee SOD RSD SDD - Concurrence.msg

Appendix A FBAASUPERVISOR security key

The following options and functionality will be locked by the FBAASUPERVISOR key after the VistA Fee Separation of Duties project is completed. Options shown in *italicas* are new.

Menu

Option locked by FBAASUPERVISOR key

Notification/Request Menu (under Civil Hospital Main Menu)

Clerk Lookup for Notification/Request

Print Entitlement Audit

Output Menu (under Civil Hospital Main Menu)

Clerk Lookup for 7078 Authorization

Output Main Menu – CNH (under Community Nursing Home Main Menu)

Clerk Lookup for 7078 Authorization

Supervisor Main Menu (under Medical Fee Main Menu)

Clerk Look-Up For An Authorization

Contract File Enter/Edit

Enter/Edit Suspension Letters

Fee Basis 1358 Segregation of Duty Report

Reprocess Overdue Batch

Resend Completed Batch

Security Key Report for Fee Basis

Site Parameter Enter/Edit

Fee Schedule Main Menu (under Supervisor Main Menu)

Add/Edit Fee Schedule

Compile Fee Schedule

MRA Main Menu (under Supervisor Main Menu)

Re-Transmit MRA's

Purge Transmitted MRAs

Unauthorized Claims File Menu (under Supervisor Main Menu)

Disapproval Reasons File Enter/Edit

Dispositions File Edit

Request Info File Enter/Edit

Outputs for Unauthorized Claims (under Unauthorized Claims Main Menu)

Clerk Lookup for Unauthorized Claim

Utilities for Unauthorized Claims (under Unauthorized Claims Main Menu)

Extension for Incomplete Mill Bill (1725) Claim

The following options do not allow the modification of an unauthorized claim with associated payments unless the user holds the FBAASUPERVISOR key:

- Disposition Unauthorized Claim [FBUC DISPOSITION UNAUTH CLAIM]

- Re-open Unauthorized Claim [FBUC REOPEN]

The following options do not allow the disposition of an unauthorized claim with associated payments to be changed to abandoned, cancelled, or withdrawn unless the user holds the FBAASUPERVISOR key:

- Appeal Edit for Unauthorized Claim [FBUC APPEAL EDIT]

- COVA Appeal Enter/Edit [FBUC COVA APPEAL]

Template Revision History

Date	Version	Description	Author
March 2013	1.1	Formatted to current ProPath documentation standards and edited to conform with latest Alternative Text (Section 508) guidelines	Process Management
January 2013	1.0	Initial Version	PMAS Business Office