**Camp Lejeune-Veterans (CL-V)**

**Increment 4**

**VistA**

**Requirements Specification Document**



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**.**

**1 Introduction**

From the 1950s to the 1980s, people living or working at the U.S. Marine Corps Base Camp Lejeune (CL), NC, were exposed to drinking water contaminated with industrial solvents, benzene, and other chemicals. On August 6, 2012, President Obama signed into law the “Honoring America’s Veterans and Caring for Camp Lejeune Families Act of 2012” (P. L. 112-

154). This law provides healthcare for Veterans who served on active duty at Camp Lejeune and reimbursement for healthcare to family members who resided at Camp Lejeune for not fewer than 30 days between August 1, 1953 and December 31, 1987. The law authorizes care for 15 medical conditions, even if there is insufficient medical evidence to conclude that such illnesses or conditions are attributable to the Veterans’ military service or family members’ residence at Camp Lejeune.

The Camp Lejeune-Veterans (CL-V) project improves organizational efficiency in providing services to affected Veterans by ensuring they are appropriately identified as Camp Lejeune eligible, assigning them to Priority Group 6, and waiving co-payments for their conditions related to Camp Lejeune. This helps to address the mandated House Resolution (H.R.) 1627

[now Public Law (P.L.) 112-154, Honoring America’s Veterans], which requires the Department of Veterans Affairs (VA) to provide hospital care and medical services to Veterans who meet the specified conditions.

**1.1 Purpose**

The purpose of this Requirements Specification Document (RSD) is to formally define and document the system requirements to support the CL-V Increment 4 project phase. This document is intended for the Contracting team (developers, testers, etc.), CL-V program Stakeholders, and business Subject Matter Experts (SMEs). The CL-V project implements system changes through front-end applications such as the Enrollment System (ES), and Veterans Health Information Systems and Technology Architecture (VistA) Registration Enrollment and Eligibility (REE) application, point of care applications [e.g., Computerized Patient Record System (CPRS), Scheduling, Pharmacy, etc.], and back office [e.g., Integrated Billing (IB), Office of Policy and Planning (OPP) reporting, and Managerial Cost Accounting (MCA), etc.]. The first phase of the CL-V project addressed the Veterans Health Administration (VHA) Eligibility and Enrollment of Camp Lejeune eligible Veterans. This RSD focuses on the second phase of the initiative (i.e., Increment 4) and addresses the downstream clinical, administrative, and back office processing of services related to the Camp Lejeune eligible Veterans’ healthcare.

**1.2 Scope**

In order to fulfill the legislative requirements, implementation of Camp Lejeune system changes from the front-end applications for point of entry, through the back office processing of Camp Lejeune related care, are required.

The solution shall enable VA to:

 Maintain databases used to track and verify Veterans identified as Camp Lejeune eligible as well as the clinical services and treatments received by the Veterans for conditions related to the Camp Lejeune eligibility

 Enhance Medical and Ancillary Services to recognize Camp Lejeune eligible Veterans for healthcare provision and effectiveness and enhance these systems to track Camp Lejeune related services and treatments

 Automate billing to include the Camp Lejeune exemption in the billing processes

 Identify and provide ongoing training to VA staff

 Provide customer service for eligible Veterans that includes behind-the-scenes work to streamline the enrollment process, verification of database accuracy, and training to staff

The following is considered in scope for this detailed requirements document:

 Capturing information at the point of care required to relate Camp Lejeune healthcare services for Camp Lejeune eligible Veterans

 Incorporating information on Camp Lejeune eligibility for Veterans into clinical flows and back office processes

 Data sharing requirements from authoritative source to consuming applications

 Error monitoring and reporting

The VistA and supporting applications enhanced and updated to implement the Camp Lejeune –

Veterans Increment 4 business needs include the following:

 VistA Patient Care Encounter (PCE)

 VistA Scheduling

 VistA Ambulatory Care Transmission (AmbCare)

 VistA Patient Treatment file (PTF)

 VistA Outpatient Pharmacy (PSO)

 VistA Radiology/Nuclear Medicine

 Clinical Procedures (CP)

 VistA Clinical Reminders

 Computerized Patient Record System (CPRS)

 Event Capture (EV)

 Managerial Cost Accounting (MCA)

 VistA Problem List (PL)

The following VistA applications and packages were considered for Camp Lejeune – Veterans Increment 4 enhancements. However, upon further analysis they have been determined to be out of scope for the project:

 Prosthetics

 Laboratory

 Surgery

 Fee Basis

**1.3 References**

 Camp Lejeune P.L. 112-154 Veterans Systems Changes Business Requirements

Document (BRD) v10

 Performance Work Statement (PWS), Camp Lejeune Veterans Indicator

 Camp Lejeune Veterans System Changes Detail v2 5 07312014 v2.4

 CL-V 4.2 ESC Inc. 3 RSD

 CL-V VistA REE RSD

 Rehabilitation Act of 1973 (29 U.S.C. 794d) as amended by the Workforce

Investment Act of 1998 (P.L. 105 - 220)

 VA Handbook 6102, Internet/Intranet Services (July 15, 2008)

 VA Directive 6500, Managing Information Security Risk: VA Information Security

[Program](http://www1.va.gov/vapubs/viewPublication.asp?Pub_ID=637&amp;FType=2) (September 20, 2012)

 VA Handbook 6500, Risk Management Framework for VA Information Systems –

Tier 3 VA Information Security (September 20, 2012)

 SACC\_2008,The Department of Veterans Affairs M Programming Standards and

Conventions (August 30, 2012)

 VA Handbook 6513, Secure External Connections (July 16, 2010)

 Federal Information Processing Standards Publication (FIPS PUB) 140-2, Security

Requirements for Cryptographic Modules (May 25, 2001)

 FIPS PUB 199, Standards for Security Categorization of Federal Information and information Systems (March 2004)

 FIPS PUB 200, Minimum Security Requirements for Federal Information and

Information Systems (March 2006)

 National Institute of Standards and Technology (NIST) Special Publications (SP)

800-30 Revision 1, Guide for Conducting Risk Assessments (September 2012)

 NIST SP 800-37 Revision 1, Guide for Applying the Risk Management Framework [to Federal Information Systems A Security Life Cycle Approach](http://csrc.nist.gov/publications/nistpubs/800-37-rev1/sp800-37-rev1-final.pdf) (February 2010)

 NIST SP 800-60, Revision 1, Guide for Mapping Types of Information and

Information Systems to Security Categories (Volume I) (August 2008)

 NIST SP 800-60, Revision 1, Guide for Mapping Types of Information and

Information Systems to Security Categories (Volumes II) (August 2008)

 NIST SP 8000-53 Revision 4, Security and Privacy Controls for Federal Information

Systems and Organizations (April 2013)

 NIST SP 800-111, Guide to Storage Encryption Technologies for End User Devices

(November 2007)

 VA Section 508 Program Office web site

**2 Overall Description**

President Barack H. Obama signed the Honoring America’s Veterans and Caring for Camp

Lejeune Families Act of 2012 into law on August 6, 2012. This law requires VA to provide

hospital care and medical services to Veterans who served on active duty at Camp Lejeune, NC, for one or more of the following 15 illnesses or conditions:

Esophageal cancer

Lung cancer Breast cancer Bladder cancer Kidney cancer Leukemia

Multiple myeloma

Myelodysplastic syndromes

Renal toxicity Hepatic steatosis Female infertility Miscarriage Scleroderma

Neurobehavioral effects

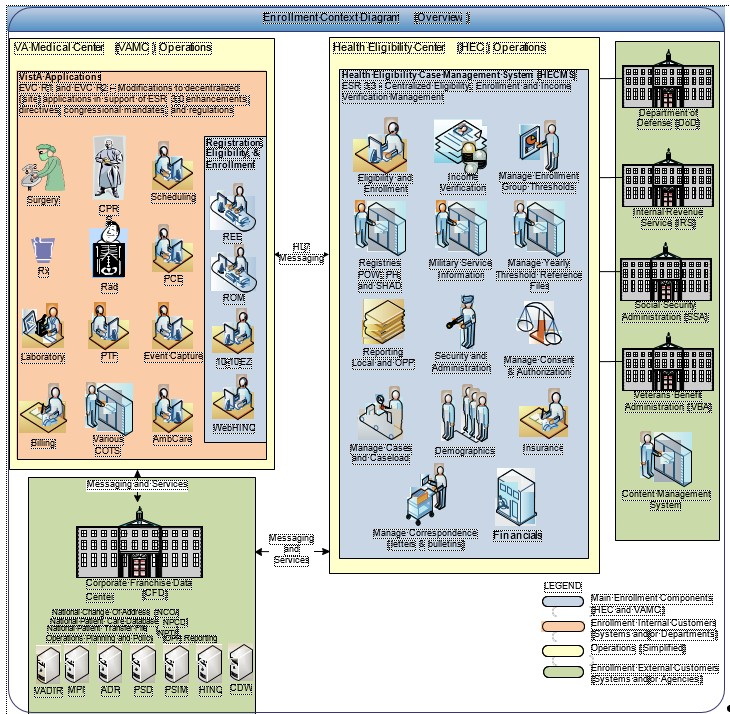
Non-Hodgkin’s lymphoma

To be eligible for care under the provisions of this bill, the Veteran must have resided or served on active duty at Camp Lejeune for not fewer than 30 days between August 1, 1953 and December 31, 1987.

The Enrollment System’s (ES) primary users are the Health Eligibility Center (HEC), Health Administration Center (HAC), and Health Resource Center (HRC) users and super users. External users of the system include the Social Security Administration (SSA) and Department of Defense (DoD). The ES processes Veterans’ enrollment applications, manages Veterans'

enrollment correspondence and telephone inquiries, shares eligibility and enrollment information with other VA organizations, and supports national reporting and analysis of enrollment data. ES compiles military service, demographics, and financial data from VA healthcare facilities and other internal (VA) and external authoritative subsystems to process Veterans’ applications for enrollment and support benefits determinations. Once compiled, ES shares this information with the VA healthcare facilities treating the Veteran.

ES consists of two major subsystems or modules: messaging and case management. The messaging subsystem provides a seamless bi-directional interface with external VHA and non- VHA systems for data exchange of Veterans’ information. The case management subsystem provides authorized VHA case representatives at the HEC with a Web interface to easily track, maintain, and manage cases associated with Veteran benefits.



**Figure 1: Enrollment Business Context Diagram**

**2.1 Accessibility Specifications**

The CL-V Increment 4 shall adhere to all Section 508 requirements which include compliance with the applicable requirements in the VHA Section 508 checklists (1194.21, 1194.22, 1194.24,

1194.31, and 1194.41) located at 508 Resources Link or as otherwise specified. Established checkpoints will ensure that accessibility is incorporated from the earliest possible design or acquisition phase and successfully implemented throughout the project.

**2.2 Business Rules Specification**

Refer to the Business Requirements Document for the business goals, needs, and owner requirements defined for the Camp Lejeune – Veterans project scope.

**2.3 Design Constraints Specification**

The CL-V Increment 4 shall adhere to all technical standards published in VA Handbook 6102, as well as all security standards described under the Security Specification section [2.13] of this document. The development coding standards will follow the M Programming Standards and [Conventions](http://vaww.oed.portal.va.gov/communities/app_dev/sac/Approved%20Documents/SACC_2008%20(508%20Compliance%20Check%20Pending).pdf) document.

**2.4 Disaster Recovery Specification**

A contingency plan will address CL-V disaster recovery needs. The emergency management staff of system sites will coordinate in developing the contingency plan and the facility director or program manager will approve it. The contingency plan will define the overall objectives and establish the framework, roles, and responsibilities of the plan. The plan will address the scope, resource requirements, processing priorities, training, testing, plan maintenance, and backup requirements of the contingency recovery plan. The contingency plan will include remote sites. Activities involved in creating this plan include conducting an impact analysis, identifying preventive measures, developing a recovery strategy, documenting the disaster plan, distributing the plan to appropriate individuals, training the staff, and testing the plan.

The contingency plan will identify the activities that are necessary to execute temporary information system processing capabilities, repair damage to the original system, and restore operational capabilities at the original or new facility. The information system contingency recovery plan will also document the resources required for supporting critical functions.

Recovery strategies will include the sequence of activities as well as detailed procedures for the technical recovery of operations until the system can be reconstituted.

**2.5 Documentation Specifications**

The CL-V Increment 4 shall provide the level of documentation required to support the system and maintain operations and continuity. Documentation shall represent minimal programmatic and lifecycle operations support artifacts as mandated by Project Management Accountability System (PMAS), ProPath, and the Integrated Project Team (IPT). User and system

documentation for the CL-V Increment 4 that supports the system enhancements and sustainment may include:

 Existing user manuals in the VistA Document Library shall be updated and training tools shall be developed.

 All training curricula, user manuals, and other training tools shall be developed/updated by the CL-V project team and delivered to all levels of users as identified by the various VistA package Business Owners.

 In-house application documentation (application requirements/program documentation, specifications/change control recommendations)

 Standard operating procedures

 Software and hardware testing procedures and results

 System interconnection agreements

**2.6 Functional Specifications**

2.6.1

**Camp Lejeune Eligibility Indicator Used by Other Applications**

**Table 1: Functional Requirements for Other Application Use of Camp Lejeune Indicator**

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.1.1 | Camp Lejeune eligibility shall exempt Veterans from paying copays for services and prescriptions if the Clinician indicates the episode of care or medications are related to Camp Lejeune exposure. |
| 2.6.1.1.1 | Camp Lejeune eligibility shall be presented to the Clinician just as other environmental factors [e.g., Agent Orange (AO), Ionizing Radiation (IR), and Southwest Asia Conditions (SWAC)] for selection of the treatment factor. |
| 2.6.1.2 | Multiple lines of business [e.g., CPRS, Patient Care Encounter (PCE), Pharmacy, Lab, etc.] shall be able to retrieve the Veteran’s current Camp Lejeune eligibility status:   Camp Lejeune Eligibility Indicator (Yes or No or blank) |
| 2.6.1.3 | If the Camp Lejeune indicator is “Yes” or “No”, then the line of business shall also be able to access the following Camp Lejeune data:   Camp Lejeune Eligibility Date Registered   Camp Lejeune Eligibility Change Site   Camp Lejeune Eligibility Source of Change |
| 2.6.1.4 | Users shall be able to view a patient’s current Camp Lejeune eligibility from the *Eligibility Inquiry for Patient Billing* option on the Admissions/Discharges/Transfers (ADT) Manager menu and/or the Registration sub-menu. |
| 2.6.1.4.1 | The Camp Lejeune indicator shall always be displayed on the Eligibility Inquiry for Patient Billing screen and will show one of the three following values as indicated in the patient’s record: Yes, No, or Not Answered.    **Figure 2: Screen Capture of Eligibility Inquiry for Patient Billing Screen** |

2.6.2

**Patient Care Encounter**

The Patient Care Encounter (PCE) software facilitates the collection, management, and display of outpatient encounter information. PCE also helps sites document patient education, examinations, treatments, skin tests, and immunizations as well as collect and manage other clinically significant information. PCE prompts for Service Connected (SC), Agent Orange (AO), Ionizing Radiation (IR), Southwest Asia Condition (SWA), Military Sexual Trauma (MST), Head and or Neck Cancer (HNC), Combat Veteran (CV), and Project 112/SHAD (Shipboard Hazard and Defense) indicators for each encounter. For those patients who have

reported Camp Lejeune eligibility, users shall need to indicate if the "treatment is related to CL." PCE includes an Encounter Check-out process. Any information related to CL that is added during the PCE Check-out process shall be retained in the appropriate records. Retaining this information shall provide a history of any changes and provide the basis for reports. CL related encounter information shall be passed along to the billing package.

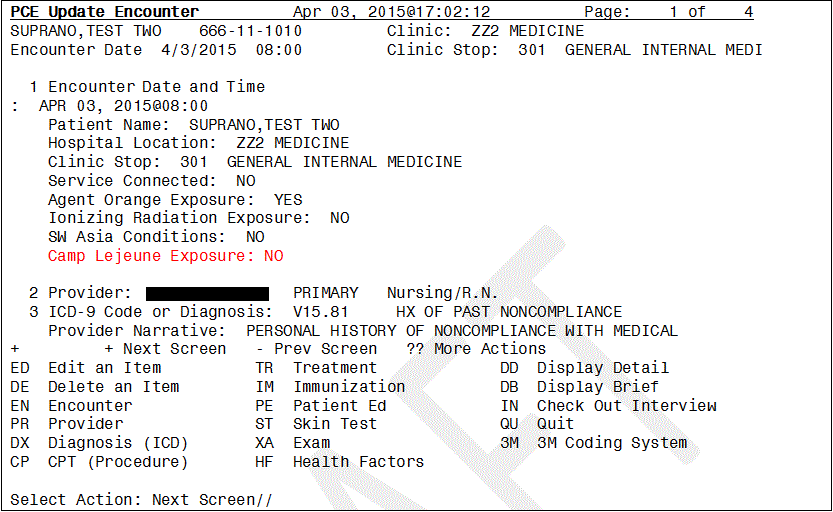
**Table 2: Functional Requirements for PCE**

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.2.1 | PCE shall be enhanced to include a new Camp Lejeune field. |
| 2.6.2.1.1 | VistA shall add a new field to the VISIT File (#9000010) for Camp Lejeune. This new field shall store/retain this classification information as a history of changes and as a basis for reports and billing purposes. |
| 2.6.2.1.2 | VistA shall add a new field to the VISIT File (#9000010) for Camp Lejeune edit flag. This new field shall store/retain this classification information as a history of changes and as a basis for reports and billing purposes. |
| 2.6.2.1.3 | VistA shall add a new field to the ‘VPOV’ File (#9000010.07) for Camp Lejeune. This new field shall store/retain this classification information as a history of changes and as a basis for reports and billing purposes. |
| 2.6.2.1.4 | VistA shall add Camp Lejeune to the query response which other VistA applications  (e.g., Scheduling, Test Integration Utility, Clinical Procedures, etc.,) can receive from PCE for service connected and environmental classifications that should/can  be asked for a patient. |
| 2.6.2.2 | A Camp Lejeune Classification question shall be added in VistA PCE. |
| 2.6.2.2.1 | VistA shall add an additional classification question for Camp Lejeune. The response shall be stored and passed on to IB. When the patient’s VHA registration  record has Camp Lejeune indicator as Yes, the user shall be prompted to indicate if  the patient’s encounter is related to Camp Lejeune.   Question: “Was treatment related to Camp Lejeune Exposure?”   User shall enter Yes to indicate that treatment was related to Camp  Lejeune.   User shall enter No to indicate that treatment was NOT related to Camp  Lejeune. |
| 2.6.2.2.2 | VistA shall ask the classification questions in the following order:  **Note:** The new Camp Lejeune question always appears last in the order as shown below. |

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
|  |  Was Treatment Related To a Service Connected Condition?   Was Treatment Related To Agent Orange Exposure?   Was Treatment Related To Ionizing Radiation Exposure?   Was Treatment Related To Service In SW ASIA?   Was Treatment Related To PROJ 112/SHAD?   Was Treatment Related To Military Sexual Trauma?   Was Treatment Related To Head/Neck Cancer?   Was Treatment Related To Camp Lejeune Exposure? |
| 2.6.2.3 | Camp Lejeune Classification Question Help Text shall be provided in VistA PCE.  When a user enters “??” at a Camp Lejeune question prompt, the following help  text shall be displayed:    **Figure 3: Screen Capture of Camp Lejeune Help Text** |
| 2.6.2.4 | PCE Screens shall be modified to show Camp Lejeune classification when user chooses to add/edit, checkout, or view PCE Encounter Data. |
| 2.6.2.4.1 | VistA shall add Camp Lejeune to the PCE Expanded Profile Screen. |
| 2.6.2.4.1.1 | VistA shall modify the Expanded Profile screen to display the Camp Lejeune field  and value when the Veteran’s Camp Lejeune indicator is Yes.  **Note:** The Expanded Profile screen is navigated to from the “EP Expand  Appointment” protocol.    **Figure 4: Screen Capture of PCE Expanded Profile – Pre-checkout Screen** |

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| **Req. ID** | **Requirement Text** |
|  | **Figure 5: Screen Capture of PCE Expanded Profile –**  **Post-checkout Screen 5 of 6**    **Figure 6: Screen Capture of PCE Expanded Profile –**  **Post-checkout Screen 6 of 6** |
| 2.6.2.4.2 | VistA shall include Camp Lejeune to the Add Diagnosis to a New Patient Care  Encounter. |

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| **Req. ID** | **Requirement Text** |
| 2.6.2.4.2.1 | If the patient’s Camp Lejeune indicator is Yes, VistA shall modify the PCE Diagnosis protocol to prompt user with the Camp Lejeune classification question.    **Figure 7: Screen Capture of Add Diagnosis to a New Standalone Encounter Screen** |
| 2.6.2.4.3 | VistA shall provide the capability to edit an Existing Patient Care Encounter to include the Camp Lejeune Exposure response. |
| 2.6.2.4.3.1 | If the patient’s Camp Lejeune indicator is Yes, VistA shall modify the PCE Update Encounter screen action to prompt user with the Camp Lejeune classification question to determine if the encounter is related to Camp Lejeune. |



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| **Req. ID** | **Requirement Text** |
|  | **Figure 8: Screen Capture of Initial Screen for Update Encounter Screen**    **Figure 9: Screen Capture of Patient's Service Connection and Rated Disabilities**  **Screen**    **Figure 10: Screen Capture of Rated Disabilities Screen** |

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| **Req. ID** | **Requirement Text** |
| 2.6.2.4.4 | VistA shall modify the Check Out Interview process to include the Camp Lejeune  Exposure response. |
| 2.6.2.4.4.1 | If the patient’s Camp Lejeune indicator is Yes, VistA shall modify the PCE Check Out interview process to prompt the user with the Camp Lejeune classification question to determine if the encounter is related to Camp Lejeune.    **Figure 11: Screen Capture of Check Out Interview Screen** |
| 2.6.2.4.4.2 | During the Check Out interview process in VistA PCE, when the response to the question “Would you like to add any Diagnoses to the Problem List?” is “Yes”, and one or more diagnosis for the encounter has been indicated as related to the Veteran’s Camp Lejeune water contaminant exposure, then the new problem (or problems) that are added to the Veteran’s Problem List shall be indicated with the exposure of “Camp Lejeune”.  **Note 1:** The “add to the problem list” question shall be asked after the last diagnosis has been entered.  **Note 2:** This interface with the Problem List package is existing functionality. The  “Camp Lejeune exposure response” needs to be added to this interface. |
| 2.6.2.4.5 | VistA shall modify the Encounter Profile Screen to include the Camp Lejeune  Exposure response. |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.2.4.5.1 | If the patient’s Camp Lejeune indicator is Yes, VistA shall modify the Encounter Profile screen process to display the response to the Camp Lejeune prompt (i.e., Yes or No).    **Figure 12: Screen Capture of Encounter Profile Screen** |
| 2.6.2.4.6 | VistA shall update the Encounter Procedure Screen to include the Camp Lejeune  Exposure response. |
| 2.6.2.4.6.1 | If the patient’s Camp Lejeune indicator is Yes, VistA shall be modified to include in the PCE Encounter Procedure processes the Camp Lejeune classification response when the procedure is associated with a Camp Lejeune related diagnosis.  **Note**: The PCE Encounter Procedure process is initiated by either the Update  Procedure protocol or as part of the PCE Check Out Interview protocol.    **Figure 13: Screen Capture of PCE Encounter Procedure Screen** |

2.6.3

**Scheduling**

VistA Scheduling provides the tools to manage the scheduling and reporting of patient appointments. Users of the Scheduling application shall be provided the ability to indicate if the treatment is related to Camp Lejeune for those patients who have claimed or reported Camp Lejeune water contaminant exposure and whose Camp Lejeune status is active.

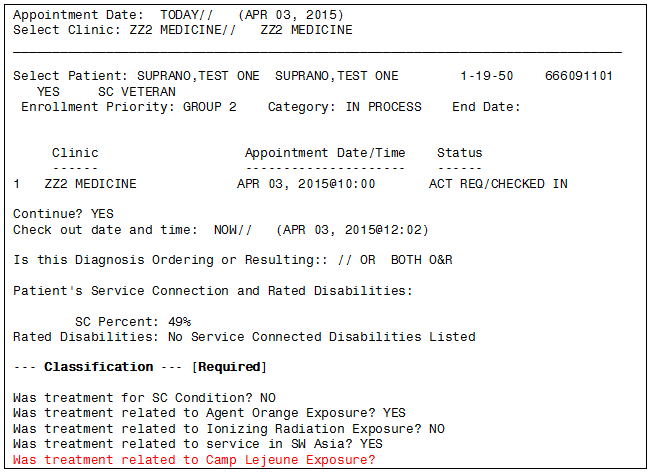
**Table 3: Functional Requirements for Scheduling**

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.3.1 | VistA shall update the Encounter Procedure Screen to include the Camp Lejeune  Exposure response. |
| 2.6.3.1.1 | Any information related to Camp Lejeune that is added or changed during the Scheduling check out process shall be retained in the appropriate records. Retaining this information shall provide a history of any changes and provide the basis for reports. Camp Lejeune related encounter information serves as the criteria for billing issues. Check out prompts are applicable to any of the options within Scheduling that permits the user to schedule an appointment for the patient. |
| 2.6.3.2 | A new Camp Lejeune field shall be added and stored in VistA Scheduling. |
| 2.6.3.2.1 | VistA shall add a new record to the OUTPATIENT CLASSIFICATION TYPE File (#409.41) for Camp Lejeune. This new record shall store/retain the information pertaining to the Camp Lejeune classification type. |
| 2.6.3.2.2 | The system shall add a new record to the OUTPATIENT CLASSIFICATION File (#409.42) for Camp Lejeune responses. This new record shall store/retain this classification information as a history of changes and as a basis for reports and billing issues. |
| 2.6.3.3 | A Camp Lejeune Classification question shall be added to VistA Scheduling. |
| 2.6.3.3.1 | VistA shall add an additional classification question for Camp Lejeune. When the patient’s Camp Lejeune indicator is Yes, the user shall be prompted to indicate if the encounter is related to Camp Lejeune. The response shall be stored and made available to Integrated Billing. |
| 2.6.3.3.1.1 | VistA shall display the following classification question: “Was treatment related to  Camp Lejeune Exposure?” |
| 2.6.3.3.1.2 | User shall enter Yes to indicate that treatment was related to Camp Lejeune. |
| 2.6.3.3.1.3 | User shall enter No to indicate that treatment was NOT related to Camp Lejeune. |
| 2.6.3.3.2 | VistA shall ask the classification questions in the following order:  **Note:** The new Camp Lejeune question always appears last in the order as shown below.   Was Treatment Related To Service Connection?   Was Treatment Related To Agent Orange Exposure?   Was Treatment Related To Ionizing Radiation Exposure?   Was Treatment Related To Service In SW ASIA?   Was Treatment Related To PROJ 112/SHAD?   Was Treatment Related to Military Sexual Trauma?   Was Treatment Related to Head/Neck Cancer?   Was Treatment Related to Camp Lejeune Exposure? |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.3.4 | Camp Lejeune Classification Question Help Text shall be provided in VistA Scheduling. |
| 2.6.3.4.1 | When a user enters “??” at a Camp Lejeune question prompt, the following help  text shall be displayed:    **Figure 14: Screen Capture of Camp Lejeune Classification Help Text Screen** |
| 2.6.3.5 | Camp Lejeune shall be added to VistA Scheduling Patient Profile Screen. |
| 2.6.3.5.1 | VistA shall modify the Patient Profile screen to display the Camp Lejeune field and value.  **Note:** The Patient Profile screen is run from the following menu option: Patient Profile Medical Administration Service (MAS) [SDPATIENT]    **Figure 15: Screen Capture of Patient Profile Screen** |
| 2.6.3.6 | Camp Lejeune shall be added to VistA Scheduling Expanded Profile Screen. |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.3.6.1 | VistA shall modify the Expanded Profile screen to display the Camp Lejeune field and value.    **Figure 16: Screen Capture of Scheduling Expanded Profile Screen**  **(Page 5 of 6)**    **Figure 17: Screen Capture of Expanded Profile Screen**  **(Page 6 of 6)** |
| 2.6.3.7 | The capability to add or edit a standalone Encounter shall be provided. |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.3.7.1 | If the patient’s Camp Lejeune Indicator is Yes, VistA shall modify the functionality to add or edit a standalone encounter so that it will ask the user if the treatment services for the encounter are related to Camp Lejeune.    **Figure 18: Screen Capture of Add/Edit Protocol Screen** |
| 2.6.3.8 | The ability to modify the Check Out Interview process shall be provided. |
| 2.6.3.8.1 | If the patient’s Camp Lejeune Indicator is Yes, VistA shall modify the Check Out Interview process so that it will ask the user if the appointment is related to Camp Lejeune. |



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| **Req. ID** | **Requirement Text** |
|  | **Figure 19: Screen Capture of Check Out Screen - Edit Mode**    **Figure 20: Screen Capture of Check Out screen – Display Mode** |
| 2.6.3.8.2 | VistA shall NOT ask the Camp Lejeune classification questions for inpatient appointments to a clinic. |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.3.8.3 | During the Check Out interview process in VistA Scheduling, when the response to the question “Would you like to add any Diagnoses to the Problem List?” is “Yes”, and one or more diagnoses for the encounter have been indicated as related to the Veteran’s Camp Lejeune water contaminant exposure, then the new problem (or problems) that are added to the Veteran’s Problem List shall be indicated with the exposure of “Camp Lejeune”.  **Note 1:** The “add to the problem list” question is asked after the last diagnosis has  been entered.  **Note 2:** This interface with the Problem List package is existing functionality. The  “Camp Lejeune exposure” needs to be added to this interface. |
| 2.6.3.9 | The Diagnosis Update process in VistA Scheduling shall be modified. |
| 2.6.3.9.1 | If the patient’s Camp Lejeune Indicator is Yes, VistA shall modify the Diagnosis Update process so that it will ask the user if the diagnosis is related to Camp Lejeune.    **Figure 21: Screen Capture of Diagnosis Update Screen** |
| 2.6.3.10 | The Edit Classification protocol in VistA Scheduling shall be modified. |

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| **Req. ID** | **Requirement Text** |
| 2.6.3.10.1 | If the patient’s Camp Lejeune Indicator is Yes, VistA shall modify the Edit Classification protocol so that it will ask the user if the treatment is related to Camp Lejeune.    **Figure 22: Screen Capture of Edit Classification Screen** |
| 2.6.3.11 | The Encounter Procedure Update protocol in VistA Scheduling shall be modified. |

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| **Req. ID** | **Requirement Text** |
| 2.6.3.11.1 | If the patient’s Camp Lejeune Indicator is Yes, VistA shall be modified to include in the “Procedure Update” protocol the Camp Lejeune classification for Camp Lejeune related diagnosis.    **Figure 23: Screen Capture of the Procedure Update Protocol Process Screen** |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.3.12 | The Encounter Procedures screen shall include the Camp Lejeune classification when indicated for the associated diagnosis.    **Figure 24: Screen Capture of the Encounter Procedure Screen** |

2.6.4

**Ambulatory Care Transmission**

The Ambulatory Care (AmbCare) product enhances the process of collecting and storing encounter-based clinical, diagnostic, and administrative outpatient and inpatient data for daily transmissions to the Corporate Data Center and Operations (CDCO) at the Austin Information Technology Center (AITC). Transmitted data is filed in the National Patient Care Database (NPCDB).

**Table 4: Functional Requirements for AmbCare**

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| **Req. ID** | **Requirement Text** |
| 2.6.4.1 | VistA shall send Camp Lejeune Eligibility information in its daily transmission to  Austin Information Technology Center (AITC) via Health Level 7 (HL7) messaging. |
| 2.6.4.1.1 | VistA shall send the Patient Camp Lejeune Eligibility Indicator in the ZEL segment.  **Note:** The ZEL segment is already programmed to transmit the Camp Lejeune  Eligibility information and transmits four Camp Lejeune fields:   Camp Lejeune Eligibility Indicator   Camp Lejeune Date Registered   Camp Lejeune Change Site   Camp Lejeune Source of Change |
| 2.6.4.1.2 | VistA shall send the Patient Encounter Camp Lejeune Indicator in the ZCL segment.  **Note:** The ZCL segment (VA Specific Outpatient Classification Segment) references table SD008 and its data are pulled from VistA classifications stored in File  #409.41. The ZCL segment can contain more than one environmental indicator for the patient encounter. |
| 2.6.4.2 | HL7 Error Code messages shall be provided in the ZEL instance for missing Camp  Lejeune Information. |
| 2.6.4.2.1 | Missing or invalid Camp Lejeune information in the HL7 messages shall be reported by using error codes. |

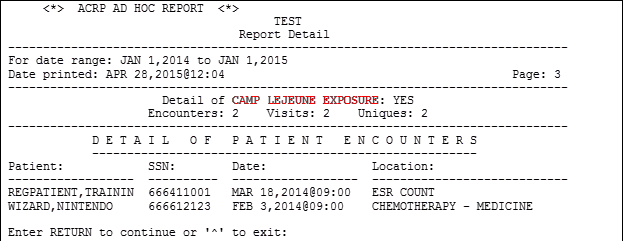
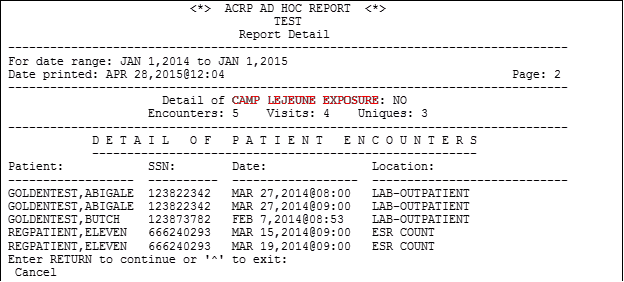
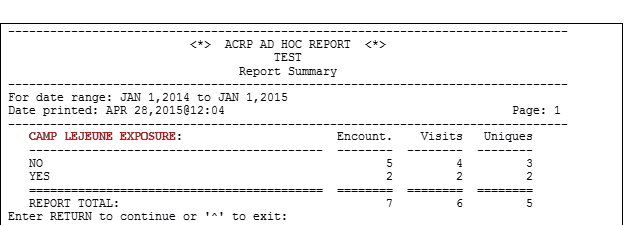
|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
|  | **Note:** Error codes for the ZEL Camp Lejeune Eligibility indicator need to be  created. Generic error codes for the ZCL environmental classification questions already exist. |
| 2.6.4.2.2 | At the VistA site, a 4-digit error code shall be reported when Camp Lejeune data is missing or invalid from the corresponding HL7 message segments:   ZCL Camp Lejeune error code is: 9050   ZEL Camp Lejeune error code is: 7390 |
| 2.6.4.2.3 | At the AITC, a 3-digit error code shall be reported when Camp Lejeune data is missing or invalid from the corresponding HL7 message segments:   ZCL Camp Lejeune error code is: 905   ZEL Camp Lejeune error code is: 739 |
| 2.6.4.2.4 | The Camp Lejeune error code descriptions for AmbCare Transmissions shall be as follows:   ZCL Segment; 905 and 9050 – Answers to Classification type questions missing   ZEL Segment; 739 and 7390 - Camp Lejeune is missing or invalid |
| 2.6.4.2.5 | Camp Lejeune error codes shall be reported based on consistency checks performed on all HL7 messaging in accordance with the AmbCare Error Code logic (see Table 5 for logic and field definitions). |
| 2.6.4.2.6 | Camp Lejeune error codes shall be displayed in help when a user enters “??” at  error codes prompt.  MST Status Invalid  7050  Veteran Status is missing or invalid  7060  MST status date invalid or inconsistent with MST status.  7100  Veteran Status inconsistent with POW status.  7120  Agent Orange exposure claimed by incompatible patient  7130  Agent Orange Exposure Location invalid/missing  7150  Radiation Exposure Method is invalid or inconsistent with radiation exposure.  7210  Radiation Exposure Indicated is missing or invalid.  7330  Combat Veteran is missing or invalid  7340  **Camp Lejeune is missing or invalid**  **739**  **Camp Lejeune is missing or invalid**  **7390**  **Answers to Classification type questions missing**  **9050**  **Answers to Classification type questions missing**  **905**  **Figure 25: Screen Capture of Help Error Code Listing Snippet** |
| 2.6.4.2.7 | Missing or Invalid Camp Lejeune information in HL7 messages shall be reported on the following Incomplete Encounter Reports:   Incomplete Encounter Error Listing Report   Incomplete Encounters by Error Code Report |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
|  |  Incomplete Encounters Report Alphabetically by Name   Transmitted Outpatient Encounter Error Listing |
| 2.6.4.2.7.1 | VistA shall enhance the Incomplete Encounter Management Error Listing report to include Camp Lejeune encounters.  **Note 1:** The Incomplete Encounter Management Error Listing report is used to print all inconsistencies and missing data for a selected date range for encounter records which have either not been transmitted to or have been rejected by the AITC National Patient Care Database (NPCDB).  **Note 2:** The Incomplete Encounter Management Error Listing report is run from the following menu option:  *Incomplete Encounter Error Report*.  **Figure 26: Screen Capture of Incomplete Encounter Management Error Listing Report**  **Screen** |

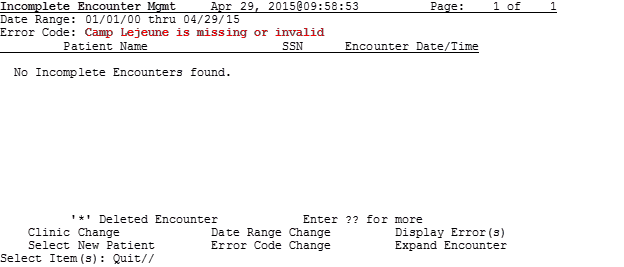
|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.4.2.7.2 | VistA shall report missing or invalid Camp Lejeune information in the Incomplete  Encounters by Error Code report.  **Note:** The Incomplete Encounters by Error Code option is used to print the errors in the TRANSMITTED OUTPATIENT ENCOUNTER ERROR CODE File  (#409.76).  **Note:** The Incomplete Encounters by Error Code Report is run from the following menu option: *Incomplete Encounters by Error Code*.  **Figure 27: Screen Capture of Incomplete Encounters by Error Code Report Screen** |
| 2.6.4.2.7.3 | VistA shall enhance the Incomplete Encounters Report Alphabetically by Name  Report to include Camp Lejeune encounters.  **Note 1:** The *Alpha List of Incomplete Encounters* option prints a list of all errors found in the TRANSMITTED OUTPATIENT ENCOUNTER ERROR File (#409.75) at the time the report is generated.  **Note 2:** The Incomplete Encounters Report Alphabetically by Name is run from the following menu option: *Alpha List of Incomplete Encounters*.    **Figure 28: Screen Capture of Incomplete Encounters Report Alphabetically by Name**  **Screen** |

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| **Req. ID** | **Requirement Text** |
| 2.6.4.2.7.4 | VistA shall enhance the Transmitted Outpatient Encounter Error List report to include Camp Lejeune encounters.  **Note 1:** The Error Listing option generates the Transmitted Outpatient Encounter Error List which contains a listing of the errors reported by the National Patient Care Database (NPCDB) for a user-specified date range. The error code description describes why the encounter data could not be filed in the NPCDB.  **Note 2:** The Transmitted Outpatient Encounter Error List is run from the following menu option: *ERR Error Listing*.    **Figure 29: Screen Capture of Error Listing Screen** |
| 2.6.4.3 | VistA shall enhance the Ambulatory Care Reporting Program (ACRP) Ad Hoc  Report to include the Camp Lejeune Class.  **Note:** This option on the ACRP REPORTS MENU allows creation of workload reports in many variations according to specified parameters. It is based on encounter activity found in the OUTPATIENT ENCOUNTER File. Holders of the SC AD HOC TEMPLATE security key may create a report parameter template that can be reused. |

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| **Req. ID** | **Requirement Text** |
| 2.6.4.3.1 | Camp Lejeune will be added to the ACRP Ad Hoc Report parameter to the  Encounter/Visit/Unique List.  **Note:** The ACRP Ad Hoc Report is run from the following menu option:  *AAH ACRP Ad Hoc Report*.    **Figure 30: Screen Capture of ACRP Ad Hoc Report Screen** |



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| **Req. ID** | **Requirement Text** |
| 2.6.4.3.2 | Users shall be able to run Ad Hoc reports using the Camp Lejeune Class parameter.  **Figure 31: Screen Capture of Ad Hoc Report Summary – Page 1 Screen**  **Figure 32: Screen Capture of Ad Hoc Report Detail – Page 2 Screen**  **Figure 33: Screen Capture of Ad Hoc Report Detail - Page 3 Screen** |



|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.4.4 | VistA shall provide the capability to search for incomplete encounters using the *Correct Incomplete Encounters* menu option and entering a Camp Lejeune error code.  **Note:** The Incomplete Encounter Mgmt listing is run from the following menu option:  *Correct Incomplete Encounters*.  **Figure 34: Screen Capture of Incomplete Encounter Mgmt Search Result Screen** |
| 2.6.4.5 | By selecting the RETRANSMIT SELECTED ERROR CODE option, users shall be able to re-flag encounter activity with a Camp Lejeune error code for transmission to AITC. |

**Table 5: CL AmbCare Error Code Logic**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Error** | **--** | | | | |
| **NPCD** | **VISTA** | **Error**  **Description** | **Correction**  **Description** | **Correction**  **Logic** | **Validation Logic** |
| 739 | 7390 | Camp Lejeune is missing or invalid | Exposure to Camp Lejeune water contaminants can only be claimed by Veteran patients that have a minimum of 30 days service at Camp Lejeune from August  1, 1953 to December  31, 1987, and have a character of discharge other than Dishonorable, Other than Honorable, Undesirable, Bad Conduct or Dishonorable-  VA. Review patient information through  Load/Edit Patient Data protocol, Screen 6,  Group 5 and Screen 7, Group 3. | Patient  Load Edit | Patients can only claim exposure to Camp Lejeune water contaminants if:  They are a Veteran  They served a minimum of 30 days at Camp Lejeune from August 1, 1953 and December 31, 1987  Have a character of discharge other than:  Dishonorable  Other than Honorable  Undesirable Bad Conduct Dishonorable-VA  Field can be Yes, No, or Null |
| 905 | 9050 | Answers to classification type questions missing | Correct classification questions through Load/Edit Patient Data protocol, Screens 6 and 7 and patient encounter screens.  **Note:** For Camp Lejeune, when a patient is Camp Lejeune eligible, each encounter must identify whether or not the patient’s treatment was related to Camp Lejeune water contamination exposure. The following scenarios constitute missing or invalid Camp Lejeune | Patient  Load Edit | Answers to classification questions must be 1,  0, or not filled in.  **Note:** For Camp Lejeune, when CL Eligibility Indicator is Yes, each encounter must have either a  Yes or No response to the Camp Lejeune exposure question.  When the CL Eligibility Indicator is No or Null, the Camp Lejeune encounter indicator should be Null. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Error** | **--** | | | | |
| **NPCD** | **VISTA** | **Error**  **Description** | **Correction**  **Description** | **Correction**  **Logic** | **Validation Logic** |
|  |  |  | information:  • Patient is Camp Lejeune eligible but there is no Camp Lejeune information for the encounter.  • Patient is NOT Camp Lejeune eligible but there is Camp Lejeune information for the encounter. |  |  |

2.6.5

**Patient Treatment File**

The Patient Treatment File (PTF) provides a record of inpatient activity, diagnoses, procedures, and surgeries performed from the time of admission to the time of discharge from inpatient care. Every VA inpatient admission generates a PTF record; for Non-VA admissions at VA expense, a PTF record is created using the *Set Up Non-VA PTF Record* option.

**Table 6: Functional Requirements for PTF**

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.5.1 | Capture Camp Lejeune eligibility in VistA PTF. |
| 2.6.5.1.1 | PTF users shall be able enter/edit Camp Lejeune eligibility information as it relates  to a Veteran’s inpatient episode of care via the following options from the PTF  main screen:   *Load/Edit PTF Data*   *Set Up Non-VA PTF Record*   *Quick Load/Edit PTF Data* |
| 2.6.5.1.2 | For those Veterans who are eligible for the Camp Lejeune exemption benefit (Camp Lejeune Eligibility Indicator = YES), the PTF shall capture whether a patient’s inpatient episode was related to Camp Lejeune exposure. This information shall be captured for each patient admission and associated movements/treatments.  **NOTE:** The initial default of the Camp Lejeune question in the PTF record is “No” so that the PTF user must explicitly set the PTF value for Camp Lejeune to “Yes” to indicate the patient’s treatment(s) are associated to the Veteran’s Camp Lejeune eligibility. |
| 2.6.5.1.2.1 | When using the PTF menu options to enter/edit information related to the patient’s inpatient episode of care, the application will ask the following classification question dependent on the PTF Screen:   101 Screen: CAMP LEJEUNE EXPOSURE INDICATED?: |

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
|  |  MAS Screen: WAS TREATMENT RELATED TO CAMP LEJEUNE?:   501 Screen: WAS TREATMENT RELATED TO CAMP LEJEUNE?:   801 Screen: WAS TREATMENT RELATED TO CAMP LEJEUNE?: |
| 2.6.5.1.2.2 | The eligible classification exemption prompts, when applicable, will be presented in the following order when adding or editing data on the 101 screen.   Was Treatment Related to Service Connection?   Was Treatment Related To Combat?   AGENT ORANGE EXPOS. INDICATED?   RADIATION EXPOSURE INDICATED?   Was Treatment Related To Service In SW ASIA?   Was Treatment Related to Military Sexual Trauma?   Was Treatment Related to Head/Neck Cancer?   CAMP LEJEUNE EXPOSURE INDICATED? |
| 2.6.5.1.2.3 | The eligible classification exemption prompts, when applicable, will be presented in the following order when adding or editing data on the MAS, 501, and 801 screens.   WAS TREATMENT FOR A SERVICE CONNECTED CONDITION?   Was Treatment Related To Combat?   WAS TREATMENT RELATED TO AGENT ORANGE EXPOSURE?   WAS TREATMENT RELATED TO IONIZING RADIATION EXPOSURE?   Was Treatment Related To Service In SW ASIA?   WAS TREATMENT RELATED TO PROJ 112/SHAD?   Was Treatment Related to Military Sexual Trauma?   Was Treatment Related to Head/Neck Cancer?   WAS TREATMENT RELATED TO CAMP LEJEUNE? |
| 2.6.5.1.2.4 | A response to the Camp Lejeune classification question in PTF, when applicable, shall be required. Allowable responses are:   YES   NO  **Note:** Responses shall be stored within the PTF File (#45). |
| 2.6.5.1.2.5 | In VistA PTF, the initial default response to the Camp Lejeune question shall be  “NO”.  WAS TREATMENT RELATED TO CAMP LEJEUNE?: NO//  When a user has responded to the classification question and then edits the record again, the default shall be the last response.  WAS TREATMENT RELATED TO CAMP LEJEUNE?: NO// Or  WAS TREATMENT RELATED TO CAMP LEJEUNE?: YES// |

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
|  | **Note:** Question text for 101 Screen shall be CAMP LEJEUNE EXPOSURE INDICATED? |
| 2.6.5.1.2.6 | When a user enters “??” at a Camp Lejeune question prompt, the following help text will be displayed:    **Figure 35: Screen Capture of Camp Lejeune Classification Question Help Text** |
| 2.6.5.2 | Load/Edit PTF and Set Up Non-VA PTF Record in VistA. |
| 2.6.5.2.1 | The VistA PTF 101 screen shall be modified to include the Camp Lejeune exposure.  **Note:** The 101 screen contains admission and discharge information for the episode of care, basic patient demographic information, and the CENSUS STATUS. Much of this screen is automatically filled in from data in the PATIENT file and the corresponding admission record in the PATIENT file. Users edit items by choosing the number(s) to the left of the group of data items they wish to edit. |
| 2.6.5.2.1.1 | For those Veterans who are Camp Lejeune eligible, users shall be able to enter/edit Camp Lejeune information by selecting Number [3] from the 101 screen.  The initial value displayed for the PTF record on the 101 Screen shall be “No”. |
| 2.6.5.2.1.2 | When entering/editing Camp Lejeune data via option [3], users shall be presented with the Camp Lejeune Question.    **Figure 36: Screen Capture of Enter/Edit Camp Lejeune data via the 101 Screen**  **Note:** Responses to the Camp Lejeune question shall be stored in the PTF File  (#45). |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.2.1.3 | After entering/editing data, the user shall be returned to the 101 screen.  **Note 1:** Refer to the two figures below for mock-ups of the 101 screen. The screen image will change based upon how many eligibilities the patient has.  **Note 2:** When numerous eligibilities are listed, the top of the screen may scroll off the visible area.    **Figure 37: Screen Capture of 101 Screen – Some Eligibilities Displayed**    **Figure 38: Screen Capture 101 Screen - More Eligibilities Displayed**  **Note 1:** The Camp Lejeune data displayed on the 101 screen shall be pulled from the PTF Patient Treatment File (#45).  **Note 2:** When Camp Lejeune is edited (i.e., selected [3] and answering the Camp Lejeune Question), the data shall be stored in the Patient Treatment File (#45). |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.2.2 | Add VistA PTF 101 Screen Help Text for Camp Lejeune. |
| 2.6.5.2.2.1 | When a user enters “?” at the PTF 101 screen prompt, the following help text will  be displayed:    **Figure 39: Screen Capture of 101 Screen Help Text Screen** |
| 2.6.5.2.3 | The VistA PTF MAS screen shall be modified to include the Camp Lejeune exposure.  **NOTE:** The “MAS” screen contains patient diagnoses and information about patient movement(s), surgery(s), procedure(s), and inpatient CPT record data such as CPT record date and time, provider information, rendering location, CPT and Health Claims Processing System (HCPS), modifiers, quantity, and up to 8 diagnosis codes per CPT/HCPS. |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.2.3.1 | If a user chooses to add or edit a patient’s movement, for those Veterans who are Camp Lejeune eligible, VistA shall ask if the patient’s treatment was related to Camp Lejeune.    **Figure 40: Screen Capture of MAS – Edit Treatment Spec/PM Screen** |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.2.3.2 | After adding/editing data, user shall be returned to the MAS screen. Users shall be  able to view, for each diagnosis, whether a patient’s treatment was related to  Camp Lejeune.  **Note:** The top of the screen may scroll off the visible area.    **Figure 41: Screen Capture of MAS Screen** |
| 2.6.5.2.4 | The VistA PTF 501 Screen shall be modified to include the Camp Lejeune exposure indicator.  **Note:** The "501" screen(s) contains information about the patient movement(s) listed on the "MAS" screen including the patient discharge movement. Because a "501" screen is generated for every patient movement which involves a specialty change, there may be more than one "501" screen. The screens are numbered as follows: 501-1, 501-2, 501-3, etc. Since the discharge movement is displayed on this screen, every PTF will have at least one "501" screen. |
| 2.6.5.2.4.1 | If a user chooses to add or edit a patient’s movement, for those Veterans who are Camp Lejeune eligible, VistA shall ask if the patient’s treatment was related to Camp Lejeune. |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.2.4.2 | When users select [2] from a 501 screen, the Camp Lejeune question shall be displayed as the last question prompted for, if applicable.    **Figure 42: Screen Capture of Enter/Edit 501 Data Screen** |
| 2.6.5.2.4.3 | Users shall be able to view, for each movement, whether a patient’s treatment was  related to Camp Lejeune. |
| 2.6.5.2.4.4 | After entering/editing data via option 2, users shall be returned to the 501 screen where the response to the Camp Lejeune question shall be visible.  **Note:** The response is displayed underneath item [1], but is editable by selecting item [2].  **Note:** The top of the screen may scroll off the visible area.    **Figure 43: Screen Capture of 501-1 Screen** |
| 2.6.5.2.5 | The VistA PTF 801 screen shall be modified to include the Camp Lejeune indicator.  **Note:** The “801” screen(s) contains information for professional services administered during the inpatient stay. It contains information regarding Common Procedure Terminology (CPT) record date and time, provider information, rendering location, procedure and diagnosis codes, modifiers, and quantity, as well as any service connection or environmental indicators. Because there is an “801” screen for every CPT record occurring during the |

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| **Req. ID** | **Requirement Text** |
|  | hospitalization, there may be more than one “801” screen. The screens are  numbered as follows: 801-1, 801-2, 801-3, etc. Each time an “801” screen  is entered; the user is prompted to send the data to PCE. If the user chooses not to send the data, the data is sent at release of the PTF record. If no professional services were captured during the inpatient stay, an “801” screen will not exist for that patient. |
| 2.6.5.2.5.1 | If a user chooses to add or edit a patient’s professional service information, for those Veterans who are Camp Lejeune eligible, VistA shall ask if the professional service was related to Camp Lejeune.    **Figure 44: Screen Capture of Enter/Edit 801 Procedures Screen** |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.2.5.2 | Camp Lejeune data shall be sent to PCE when the user enters “S” at the  command prompt to Send data to PCE.  Name: CROSSMAN,TEST SSN: 666121234 Dt of Adm: APR 7,2015 16:18 <1>  [A] CPT Record Date/Time: APR 14,2015 15:04  Referring or Ordering Provider: DUCK,TEST Rendering Provider: HENDRY,MIKE  Rendering Location: TEST 2  [B] Procedures: 1200F SEIZURE TYPE(S)+ FRQ DOCD Quantity: 1  Enter <RET> to continue, A-B to edit, 'I' to add an 801, the number of an 801 screen, ?? to list 801 screens,  'S' for Send to PCE, '^N' for screen N, or '^' to abort:: MAS//  **Figure 45: Screen Capture of Command Prompt to Send Data to PCE Screen** |
| 2.6.5.3 | The VistA Quick Load/Edit PTF Data option shall be modified to include the Camp  Lejeune indicator.  **Note:** The Quick Load/Edit PTF Data option is used to enter/edit data to an open PTF record using list format, **rather than screen format**, which allows for faster editing. Only PTF records with a status of OPEN may be edited through this option.  The editing in this option is broken down into five segments as follows.  1st segment 101 and 701 transaction data  2nd segment 501 transaction data  3rd segment 401 transaction data  4th segment 801 transaction data  5th segment 601 transaction data |
| 2.6.5.3.1 | VistA shall enhance Segment 1: 101 and 701 Admission and Discharge  Transactions to ask for Camp Lejeune information.  **Note**: These transactions contain admission and discharge information for the episode of care and basic patient demographic information. |
| 2.6.5.3.1.1 | Users shall be able to update the Camp Lejeune classification question in segment  1 of the Quick Load/Edit PTF data option. |
| 2.6.5.3.1.2 | VistA PTF Segment 1 shall include the Camp Lejeune Classification question text:  “CAMP LEJEUNE EXPOSURE INDICATED?” |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.3.1.3 | Classification questions shall be asked in the order defined in section 2.6.5.1.2.2  dependent on a Veteran’s eligibilities.    **Figure 46: Screen Capture of Quick Load/Edit PTF Data; Segment 1: 101 & 701**  **Screen**  **Note:** Responses to the Camp Lejeune question are stored in the PTF File (#45). |
| 2.6.5.3.2 | Modify VistA PTF Segment 2: 501 Movement Transactions to include the Camp  Lejeune indicator. |
| 2.6.5.3.2.1 | Users can update the Camp Lejeune classification question in segment 2 of the  Quick Load/Edit PTF data option. |
| 2.6.5.3.2.2 | VistA PTF Segment 2 shall include the Camp Lejeune Classification question text:  “WAS TREATMENT RELATED TO CAMP LEJEUNE?” |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.3.2.3 | Classification questions will be asked in the order defined in section 2.6.5.1.2.2  dependent on a Veteran’s eligibilities.    **Figure 47: Screen Capture of Quick Load/Edit PTF Data; Segment 2: 501 Screen** |
| 2.6.5.3.3 | VistA PTF Segment 4: 801 Professional Service Transactions shall be modified to include the Camp Lejeune indicator. |
| 2.6.5.3.3.1 | Users shall be able to update the Camp Lejeune classification question in segment  4 of the Quick Load/Edit PTF data option. |
| 2.6.5.3.3.2 | VistA PTF Segment 4 shall include the Camp Lejeune Classification question text:  “WAS TREATMENT RELATED TO CAMP LEJEUNE?” |

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| **Req. ID** | **Requirement Text** |
| 2.6.5.3.3.3 | Classification questions shall be asked in the order defined in section above and are dependent on a Veteran’s eligibilities.    **Figure 48: Screen Capture of Quick Load/Edit PTF Data; Segment 4: 801 Screen** |
| 2.6.5.3.3.4 | Camp Lejeune data shall be sent to PCE when the user enters "Yes" at the prompt:  **Send record to PCE? : NO//Yes**  **Figure 49: Screen Capture of Send Record to PCE Prompt Screen** |
| 2.6.5.4 | VistA PTF Release Records shall be modified for Transmission. |
| 2.6.5.4.1 | When a PTF record is released, by selecting “Release PTF records for Transmission” from the main menu, any 801 entries to include Camp Lejeune data associated with that record that have not been transmitted to PCE, shall be transmitted. |
| 2.6.5.5 | VistA Inquire PTF Record option shall be modified.  **Note:** The *Inquire PTF Record* option is used to view the information contained in |

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| **Req. ID** | **Requirement Text** |
|  | a patient's PTF records. The records are selected by patient name and, if there are multiple admissions for that patient, by admission. The user may  select several different patients' records for viewing at one time through this option. |
| 2.6.5.5.1 | Users shall be able to view a patient’s Camp Lejeune Information contained in the  PTF record by selecting “Inquire PTF Record” from the “PTF Output Menu”. |
| 2.6.5.5.2 | If a user has not modified the Camp Lejeune treatment status within PTF the default value displayed on the screen shall be “NO”.    **Figure 50: Screen Capture of View PTF Inquiry Screen**  **Note:** The Camp Lejeune data displayed when selecting Inquire PTF Record is pulled from the PTF File (#45). |
| 2.6.5.6 | VistA PTF TRANSMISSION to AITC via MailMan shall be modified. |
| 2.6.5.6.1 | PTF shall transmit a patient’s Camp Lejeune status to AITC in the following  segments:   101 Segment (Patient Level)   701 Segment (Summary Level) |
| 2.6.5.6.2 | PTF shall NOT transmit a patient’s Camp Lejeune status in the 501 Segment  (Movement Level). |
| 2.6.5.6.3 | PTF shall transmit for both ICD-9 and ICD-10.  **Note:** Only holders of the security Key DG PTFTRANS may access the PTF Transmission Option. |
| 2.6.5.7 | VistA PTF Close-Out Errors screens shall be modified |
| 2.6.5.7.1 | The PTF Close-Out Errors screen for the 101 segment shall be modified to include |

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|  | the Camp Lejeune indicator value from the patient’s registration record. The value  “1” will display if the Veteran’s Camp Lejeune eligibility indicator is Yes. The value  “0” (zero) will display if the Veteran’s Camp Lejeune eligibility indicator is No. If the Veteran’s Camp Lejeune eligibility indicator is currently not answered (i.e., neither Yes or No), the “CL” label will display but the value will be blank (white space).    **Figure 51: Screen Capture of PTF Close-Out Errors Screen (101 segment)** |
| 2.6.5.7.2 | The PTF Close-Out Errors screen for the 701 segment shall be modified to include the Camp Lejeune indicator value of the PTF treatment record. The value “Y” will display if the Veteran’s treatment is indicated as related to Camp Lejeune. The value “N” will display if the Veteran’s treatment is not indicated as related to Camp Lejeune. If the Veteran’s Camp Lejeune indicator is not currently indicated for the treatment (i.e., neither Yes or No), the “CL” label will display but the value will be blank (white space).    **Figure 52: Screen Capture of PTF Close-Out Errors Screen (701 segment)** |

2.6.6

**Outpatient Pharmacy**

Outpatient Pharmacy (PSO) provides a method for managing the medications given to Veterans who have visited a clinic or who have received prescriptions upon discharge from the hospital.

**Table 7: Functional Requirements for PSO**

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| **Req. ID** | **Requirement Text** |
| 2.6.6.1 | Add and store a Camp Lejeune field in VistA Outpatient Pharmacy Order  Processing. |
| 2.6.6.1.1 | VistA Outpatient Pharmacy shall add processing of the Camp Lejeune eligibility indicator, an Environmental Indicator (EI), during the outpatient medication order processes for those Veterans eligible for this benefit. |
| 2.6.6.1.2 | For those Veterans who are eligible for the Camp Lejeune exemption benefit, Outpatient pharmacy (PSO) shall ask if the medication order is related to a Camp Lejeune condition. The Camp Lejeune prompting question is asked of the ordering provider or pharmacist; depending on the order or fills being initiated by CPRS, or VistA Outpatient Pharmacy “backdoor” application.  **Note:** Camp Lejeune eligibility responses shall be stored in PRESCRIPTION File  #52 and any other temporary prescription files that collect this type of outpatient pharmacy information (i.e., PENDING OUTPATIENT ORDERS File #52.41). |
| 2.6.6.1.3 | The eligibility billing exemption prompts, when applicable, shall be presented in a specific order as follows:   Service Connected (SC)   Combat Veteran (CV)   Vietnam-era herbicide (Agent Orange)-exposed Veterans (AO)   Radiation-exposed Veterans (IR)   Veterans exposed to environmental contaminants during Persian Gulf  War service (SWAC)   Shipboard Hazard and Defense (SHAD)   Military Sexual Trauma (MST)   Head and/or Neck Cancer (HNC)   Camp Lejeune (CL) |
| 2.6.6.2 | Add and store a Camp Lejeune field for New Medication Orders in VistA Outpatient Pharmacy. |
| 2.6.6.2.1 | When a new order is being placed, VistA Outpatient Pharmacy shall perform a check for the Camp Lejeune status of the Patient.  **Note:** New Rx orders in VistA Outpatient Pharmacy are placed via the “New Orders” protocol within the *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS] menu option. |
| 2.6.6.2.2 | When completing a Prescription, the VistA Outpatient Pharmacy user shall be prompted for all the environmental eligibilities for which the patient is eligible, to |

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|  | include the Camp Lejeune eligibility. When the Patient is determined to be Camp  Lejeune eligible when placing a new order, the VistA user shall be prompted with the following question:  “Was treatment related to Camp Lejeune water contaminant exposure?” |
| 2.6.6.2.2.1 | If the Veteran is not Camp Lejeune eligible, the Camp Lejeune question shall not be presented to the VistA user when placing a new outpatient prescription order. |
| 2.6.6.2.3 | The Camp Lejeune prompting question shall not have a default for a new outpatient prescription order. |
| 2.6.6.2.4 | When placing a new prescription order, the Camp Lejeune question shall be required; the VistA user must enter a “Yes” or “No” response to the Camp Lejeune question. |
| 2.6.6.2.5 | When creating a new outpatient pharmacy prescription order, if the user does not respond with a “Yes” or “No”, the system shall present the following warning message then redisplay the Camp Lejeune question.  “This is a required response. Enter ‘^’ to exit.” |
| 2.6.6.2.6 | The following help text is available to the Outpatient Pharmacy VistA user at the  Camp Lejeune prompt question:    **Figure 53: Screen Capture of Camp Lejeune Prompt Question Help Text Screen** |
| 2.6.6.2.7 | If the user exits from the process (i.e., ‘^’) or the VistA session times out of the environmental prompts, including the Camp Lejeune prompt, when creating a new prescription order, the order shall be deleted. The Camp Lejeune response is not saved.  **Note:** This is existing functionality with the current environmental indicator prompts. |
| 2.6.6.2.8 | If the Camp Lejeune question is answered “Yes” and the prescription is otherwise deemed billable, then the copay status of the new order shall be set to NO COPAY and the prescription’s Camp Lejeune copay exemption flag shall be set  to YES.  If the Camp Lejeune question is answered “No”, and the prescription is otherwise deemed billable, then the prescription’s copay status shall be set to “COPAY” and the Camp Lejeune copay exemption flag shall be set to “No”. |
| 2.6.6.2.9 | When creating a new prescription order, the Camp Lejeune response entered shall be associated with the new prescription order.  **Note:** The Camp Lejeune prompt answer provided is stored in the  PRESCRIPTION File (#52). |

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| **Req. ID** | **Requirement Text** |
| 2.6.6.3 | Add and store a Camp Lejeune field for Renewal Medication Orders in VistA Outpatient Pharmacy. |
| 2.6.6.3.1 | When a renewal order is being entered, VistA Outpatient Pharmacy shall perform a check for the Camp Lejeune eligibility status for the Patient.  **Note:** Renewal of Outpatient medication in VistA Outpatient Pharmacy can be initiated from two places within the application:  1. The “Renew (RN)” protocol within the *Patient Prescription Processing*  [PSO LM BACKDOOR ORDERS] menu option.  2. *BARCODE BATCH PRESCRIPTION ENTRY* [PSO BATCH BARCODE] menu option, VistA Pharmacy shall perform a check for the Camp Lejeune environmental indicator. |
| 2.6.6.3.2 | Although the *TPB* (Transitional Pharmacy Benefit) menu options have been placed out of order (Patch PSO\*7\*227), all TPB functionality must be updated to support CL functionality.  **Note:** Due to the fact that this menu option is placed out of order, it is not SQA testable. Any Camp Lejeune enhancements made to the functions within the menu option are only testable locally in a developer’s environment. |
| 2.6.6.3.3 | When the Patient is determined to be Camp Lejeune eligible when placing a renewal order, the VistA user shall be prompted with the following question: “Was treatment related to Camp Lejeune water contaminant exposure?” |
| 2.6.6.3.3.1 | If the Veteran is not Camp Lejeune eligible when placing a renewal prescription order, the Camp Lejeune question shall not be presented to the VistA user. |
| 2.6.6.3.4 | The Camp Lejeune prompting question value shall be defaulted to the value from the original order from which the renewal is being created.  **Note:** Current functionality: All applicable prompts will be presented to the user and all medication copay exemption values, including the Camp Lejeune eligibility, shall be carried over from the prescription being renewed. |
| 2.6.6.3.5 | **I**f the Patient is found to be no longer eligible for Camp Lejeune at the time a renewal is being processed, the Camp Lejeune copay exemption shall be removed from the new renewal order being created and the user shall not be prompted for a Camp Lejeune question response. |
| 2.6.6.3.6 | When the VistA user is presented with the Camp Lejeune prompt, a response shall be required. The user must accept the default value or enter a “Yes” or “No” response to the Camp Lejeune question (a blank value is not allowed). |
| 2.6.6.3.7 | The System shall not allow the VistA user to delete an existing “Yes” or “No”  value from the Camp Lejeune question. |
| 2.6.6.3.7.1 | If the user enters ‘@’ to delete the Camp Lejeune response value, the system shall present the following error message, then redisplay the Camp Lejeune question. |

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| **Req. ID** | **Requirement Text** |
|  | “This is a required response. Enter ‘^’ to exit.” |
| 2.6.6.3.8 | When placing a renewal prescription order, the following help text is available at the Camp Lejeune question.    **Figure 54: Screen Capture of Camp Lejeune Question Help Text Screen** |
| 2.6.6.3.9 | If the Camp Lejeune question is answered “Yes” and the prescription is otherwise deemed billable, then the copay status of the new order shall be set to NO COPAY and the prescription’s Camp Lejeune copay exemption flag shall be set  to “Yes”.  If the Camp Lejeune question is answered “No”, and the prescription is otherwise deemed billable, then the prescription’s copay status shall be set to COPAY and the Camp Lejeune copay exemption flag shall be set to NO. |
| 2.6.6.3.10 | The Camp Lejeune response entered for a renewal shall be associated with the new prescription order.  **Note:** The Camp Lejeune prompt answer provided shall be stored in the  PRESCRIPTION File (#52). |
| 2.6.6.3.10.1 | If a user exits from the renewal process (i.e., enters “^”) or the VistA session  times out at any of the exemption questions when creating a renewal prescription order in VistA, the renewal shall be retained and all responses that were changed up to that point shall have the new value. If an eligible classification exemption does not have a response and the VistA user exits prior to providing a response, including the Camp Lejeune exemption, the system shall default the response to NO. If the exemption has previously been set to YES or NO and the Vista user exits prior to providing a response, including the Camp Lejeune exemption, the system shall retain the previous value. |
| 2.6.6.4 | A Camp Lejeune field shall be added and stored when creating New Prescription  Order from an Existing Medication Order in VistA Outpatient Pharmacy.  **Note:** New medication orders can be created from an existing prescription in  VistA Outpatient Pharmacy through two existing processes, to include:   Edit Medication Order\*   Copy Medication Order  **\***Only specific fields when editing a prescription shall trigger the creation of a new order; these fields include:  o Orderable Item  o Dosage  o Route  o Schedule  o Duration |
| 2.6.6.4.1 | **T**he VistA copy and edit processes shall include the Camp Lejeune prompt |

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| **Req. ID** | **Requirement Text** |
|  | question, if the patient is determined to be Camp Lejeune eligible. |
| 2.6.6.4.2 | When the Patient is determined to be Camp Lejeune eligible, when creating a new order from the copy or edit functions, the VistA user shall be prompted with the following question:  “Was treatment related to Camp Lejeune water contaminant exposure?”  **Note:** The existing copy or edit functionality will not change; the software will only be modified to accommodate the Camp Lejeune prompt. |
| 2.6.6.4.2.1 | When creating a new order from the copy or edit functions, if the Veteran is not Camp Lejeune eligible, the Camp Lejeune question shall not be presented to the VistA user. |
| 2.6.6.4.3 | If a new medication order is created due to a copy or edit, any stored medication copay exemption values that exist on the original prescription shall be carried over to the new order, to include the Camp Lejeune copay exemption value. |
| 2.6.6.4.3.1 | The Camp Lejeune prompting question value shall be defaulted to the value from the original order from which the copy or edit is being created. |
| 2.6.6.4.3.2 | Upon accepting the new order, from the copy or edit functions, the pharmacy user shall be prompted with all medication copay exemption questions and corresponding default values. The user shall be able to modify the response of any default value. |
| 2.6.6.4.4 | If the user exits the Copy/Edit process before completing the acceptance of the new order, the copy/edit action shall be terminated, the Camp Lejeune question default or modified default response shall not be retained, and only the original prescription shall remain on file.  **Note:** Current functionality: All applicable prompts shall be presented to the user and all medication copay exemption values, including the Camp Lejeune eligibility, shall be carried over from the original or edited prescription. |
| 2.6.6.4.5 | When creating a new order from the copy or edit functions, and the patient is determined to be Camp Lejeune eligible, the Camp Lejeune question shall be required; the VistA user must indicate a “Yes” or “No” response to the Camp Lejeune question. |
| 2.6.6.4.6 | The System shall not allow the VistA user to delete an existing “Yes” or “No” value from the Camp Lejeune question when creating a new order from the copy or edit functions. |
| 2.6.6.4.6.1 | If the user enters ‘@’ to delete the Camp Lejeune response value, the system shall present the following error message, then redisplay the Camp Lejeune question.  “This is a required response. Enter ‘^’ to exit.” |
| 2.6.6.4.7 | If the Patient is found to be no longer eligible for Camp Lejeune the user shall not be prompted for a Camp Lejeune response. |

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| **Req. ID** | **Requirement Text** |
| 2.6.6.4.8 | When creating a new prescription order from the copy or edit functions, the following help text shall be available at the Camp Lejeune prompting question.    **Figure 55: Screen Capture of Camp Lejeune Prompt Question Help Text Screen** |
| 2.6.6.4.9 | The Camp Lejeune response entered for the new prescription order created from the copy or edit process shall be associated with the new prescription order.  **Note:** The Camp Lejeune prompt answer provided shall be stored in the  PRESCRIPTION File (#52). |
| 2.6.6.4.10 | When processing a new prescription order from a copy or edit, if a user exits (i.e., “^”) or the VistA session times out at any medication copay exemption question, including Camp Lejeune prompt, the new order shall not be retained. |
| 2.6.6.4.11 | When creating a new prescription order from the copy or edit functions, if the Camp Lejeune question is answered YES and the prescription is otherwise deemed billable, then the copay status of the new order shall be set to NO COPAY and the prescription’s Camp Lejeune copay exemption flag shall be set to YES.  If the Camp Lejeune question is answered “No”, and the prescription is otherwise deemed billable, then the prescription’s copay shall be set to COPAY and the Camp Lejeune copay exemption flag shall be set to NO. |
| 2.6.6.5 | A Camp Lejeune field shall be added and stored when creating a New Medication  Order in CPRS.  **Note:** New medication orders can be created in CPRS through several processes, to include:   New Medication Order   Renewal Medication Order   Copy Medication Order |
| 2.6.6.5.1 | When signing a new CPRS medication order, if the patient is eligible for Camp Lejeune exemption status, CPRS shall prompt the clinician to indicate if the medication order is related to the Veteran’s Camp Lejeune water contaminant exposure.  **Note:** The CPRS graphical user interface (GUI) has already been developed to support the Camp Lejeune changes for CPRS. Development of the items above needs to integrate with the GUI as already coded in CPRS v30B. |
| 2.6.6.5.2 | The help text that is available in the CPRS “Sign Orders” screen by either hovering the cursor over the top of the term or using a keyboard shortcut key (Alt+L) shall be updated to include help with the Camp Lejeune indicator. |

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| **Req. ID** | **Requirement Text** |
| 2.6.6.5.3 | If the Veteran for whom the Rx is being ordered in CPRS is not Camp Lejeune eligible then the Camp Lejeune prompt (i.e., Checkbox) shall be disabled. |
| 2.6.6.5.4 | If the Camp Lejeune prompt is enabled during the order signing process in CPRS, a response to the Camp Lejeune prompt shall be required (i.e., Checked/Unchecked).   For a new order, including one created from a renewal or copy/edit, the Camp Lejeune response value shall default to a blank value (represented by a question mark prompt in the CPRS GUI). |
| 2.6.6.5.4.1 | If a clinician does not provide a response to the Camp Lejeune prompt (if enabled), at the time of submit, the CPRS system shall provide the following error message to the provider.    **Figure 56: Screen Capture of the Missing Service Connection Prompt Error**  **Message Screen**  **Note:** The error message (shown above) presented when the Camp Lejeune prompt is left unanswered already exists and is presented anytime one or more of the SC/EI questions are missing at the time of signing an outpatient medication order. |
| 2.6.6.6 | A Camp Lejeune field shall be added and stored when completing a Pending  Prescription Order in VistA Outpatient Pharmacy.  **Note:** When a clinician, via CPRS, has created and signed a new Rx order for a patient, the pharmacist then completes/verifies the pending order received from CPRS in VistA Outpatient Pharmacy “backdoor” application. This process is performed in the Complete Orders from *OE/RR* [PSO LMOE FINISH] VistA menu option and applies to the following:   (CPRS) New Medication Order   (CPRS) Renewal Medication Order   (CPRS) Copy Medication Orders |
| 2.6.6.6.1 | The pending prescription order data from CPRS, to include the Camp Lejeune response, if applicable, shall be displayed to the pharmacist during the prescription completion process. |
| 2.6.6.6.2 | When prescriptions are completed by the pharmacist, the VistA Outpatient Pharmacy system determines the copay status based on affirmative exemption flags including Camp Lejeune. If the copay status is determined to be “No Copay”, then the prescription shall not be sent to Integrated Billing at the time of completion. |

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| **Req. ID** | **Requirement Text** |
| 2.6.6.6.3 | When completing a pending outpatient prescription order, if the Camp Lejeune question is answered YES and the prescription is otherwise deemed billable, then the copay status of the new order shall be set to NO COPAY and the prescription’s Camp Lejeune copay exemption flag shall be set to YES.  If the Camp Lejeune question is answered NO, and the prescription is otherwise deemed billable, then the prescription’s copay shall be set to COPAY and the Camp Lejeune copay exemption flag shall be set to NO. |
| 2.6.6.6.4 | If VistA user exits from the renewal process (i.e., enters “^”) or the VistA session times out at any of the exemption questions when completing a renewal prescription order from CPRS, the renewal shall be retained and all responses that were changed up to that point shall have the new value. If an eligible classification exemption does not have a response and the VistA user exits prior to providing a response, including the Camp Lejeune exemption, the system shall default the response to NO. If the exemption has previously been set to YES or NO and the Vista user exits prior to providing a response, including the Camp Lejeune exemption, the system shall retain the previous value. |
| 2.6.6.7 | A Camp Lejeune field shall be added and stored for the release of a Fill/Refill in  VistA Outpatient Pharmacy. |
| 2.6.6.7.1 | During the release of a prescription fill/refill, various checks (i.e., patient eligibility, copay exemption status, etc.) are performed to determine the copay status of a prescription. These checks shall include a check for current Camp Lejeune eligibility for a prescription fill/refill. |
| 2.6.6.7.2 | Requirement removed per RTC #259752. Requirement ID retained as a placeholder. |
| 2.6.6.7.2.1 | Requirement removed per RTC #259752. Requirement ID retained as a placeholder. |
| 2.6.6.7.2.2 | The system shall add a check for a Veteran’s Camp Lejeune eligibility when  determining if the patient meets any of the copay exemption criteria as follows:   Service-Connected (SC)   Military Sexual Trauma (MST)   Agent Orange (AO)   Environmental Contaminants (EC)   Ionizing Radiation (IR)   Head and/or Neck Cancer (HNC)   Combat Veteran (CV)   Shipboard Hazard and Defense (SHAD)   Camp Lejeune (CL) |
| 2.6.6.7.3 | A MailMan Message shall be sent for Required Exemption Flags. |
| 2.6.6.7.3.1 | At the release of a fill/refill, if any copay exemption question applies for the patient, but has not been answered with regards to the billing exemption of the medication order, a ‘Prescription Questions Review Needed’ MailMan message |

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| **Req. ID** | **Requirement Text** |
|  | will be generated to request that the exemption response be addressed. |
| 2.6.6.7.3.2 | Any copay exemption criteria that a patient meets shall be included in the  ‘Prescription Questions Review Needed’ MailMan message generated and shall include the Camp Lejeune exemption classification, if applicable, as shown in the following sample:    **Figure 57: Screen Capture of MailMan Message for Rx Exemption Review Needed**  **Screen** |
| 2.6.6.8 | Copay status evaluation for Outpatient Prescription Labels in VistA Outpatient  Pharmacy shall be modified. |
| 2.6.6.8.1 | When evaluating the copay status of a prescription, either to print the text “COPAY” or “NO COPAY” (for both regular and laser print processes), the evaluation shall include the Camp Lejeune classification copay exemption classification. |
| 2.6.6.9 | The Inquiry of a Prescription’s Current Copay Status and Exemption Flags in  VistA Outpatient Pharmacy shall be modified. |

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| **Req. ID** | **Requirement Text** |
| 2.6.6.9.1 | Upon entering a prescription number from the *Reset Copay Status/Cancel Charges* [PSOCP RESET COPAY STATUS] menu option, the system shall display the current value of the copay status of the prescription (“Copay” or “No Copay”) as well as each exemption flag, to include the Camp Lejeune flag if currently set to “Yes”.  **Note:** To make no changes to the billing exemption status of the prescription, the user should respond “No” to both prompt questions that follow the display of exemption statuses.    **Figure 58: Screen Capture of Inquiry of a Rx Current Copay Status and Exemption**  **Flags Screen** |
| 2.6.6.10 | Resetting of a Prescription’s Copay Status in VistA Outpatient Pharmacy shall be modified. |
| 2.6.6.10.1 | The Vista Outpatient Pharmacy user shall be able to reset the copay status of a prescription with a reason of “Camp Lejeune” without having to cancel any incurred copay charges.  **Note 1:** Resetting Rx order copays in VistA Outpatient Pharmacy are performed via the *Reset Copay Status/Cancel Charges* [PSOCP RESET COPAY STATUS] menu option.  **Note 2:** The existing functionality of resetting a prescription’s copay status shall not change; the software shall only be modified to accommodate the Camp Lejeune exemption classification. |
| 2.6.6.10.1.1 | Camp Lejeune shall be added to the list of Reasons for resetting a prescription’s  copay status. |

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| **Req. ID** | **Requirement Text** |
| 2.6.6.10.2 | When resetting the copay status and the Camp Lejeune exemption flag is currently set as “Yes”, then Camp Lejeune shall be displayed in the listing of flags set when answering “Yes” to the prompt question “Do you want to enter/edit any copay exemption flags” as follows:    **Figure 59: Screen Capture of Resetting of Copay Status Screen** |
| 2.6.6.10.3 | The reset prompting question help file shall include Camp Lejeune as reason number 50.    **Figure 60: Screen Capture of Camp Lejeune Reset Reason Screen** |
| 2.6.6.10.4 | When a prescription copay status is reset for the reason of Camp Lejeune, the activity shall be stored in the COPAY ACTIVITY LOG. |
| 2.6.6.11 | The End-User Edit value of Copay Exemption Flags shall be added and stored in  VistA Outpatient Pharmacy. |
| 2.6.6.11.1 | The Vista Pharmacy user shall be able to edit the exemption flag of a prescription with a reason of Camp Lejeune.  **Note:** Editing an Rx exemption flag in VistA Outpatient Pharmacy is performed via the *Reset Copay Status/Cancel Charges* [PSOCP RESET COPAY STATUS] menu option. |
| 2.6.6.11.20 | VistA Outpatient Pharmacy shall display a question for each environmental indicator exemption for which the Veteran is currently eligible, to include Camp Lejeune eligibility. |
| 2.6.6.11.3 | In VistA Outpatient Pharmacy the Camp Lejeune exemption question shall be defaulted to the current value for the prescription, but is editable. |
| 2.6.6.11.3.1 | In VistA Outpatient Pharmacy, if the Camp Lejeune exemption flag value is not currently set for a prescription, the Camp Lejeune prompt question shall be asked with no default value displayed. |

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| **Req. ID** | **Requirement Text** |
| 2.6.6.11.4 | In VistA Outpatient Pharmacy, when setting/resetting the exemption flags, to include the Camp Lejeune exemption flag, a response shall not be required. Any current value to the Camp Lejeune exemption flag may be deleted by the VistA user.    **Figure 61: Screen Capture of End-User Edit of Copay Exemption Flags Screen** |

2.6.7

**Integrated Billing**

Integrated Billing (IB) software provides all the features necessary to create first party (patient) and third party (insurance carriers/Medicare) bills. An Automated Biller module provides a process that automatically creates bills for billable events which can then be finished and authorized by the billing staff. The IB software also provides many reporting features that support the billing staff by providing statistics, tracking, and historical information. It is dependent on data from Registration, Scheduling, Outpatient Pharmacy, and Patient Care Encounter (PCE) VistA packages to determine billable events.

**Table 8: Functional Requirements for IB**

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| **Req. ID** | **Requirement Text** |
| 2.6.7.1 | Events to be billed to a Third Party shall first be identified and tracked in Claims Tracking (CT). The CT module of IB shall be updated to identify and flag as non- billable outpatient encounters and prescriptions related to Camp Lejeune. |
| 2.6.7.2 | All CT entries may be assigned a Reason Not Billable (RNB) that will remove the event from all unbilled lists. The list of RNBs shall be updated to allow “Camp Lejeune Treatment” as a reason an event should not be billed.  **Note:** As of this writing, “Camp Lejeune Treatment” has been added as a RNB to CT (File #356) and is available for the IB user to manually assign Camp Lejeune as an RNB to a billable event. |
| 2.6.7.3 | Reason Not Billable to an Event shall be added in VistA IB Claims Tracking. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.3.1 | The View/Edit (VE) protocol of the CT Edit Screen shall display the RNB “Camp  Lejeune Treatment” when the event has been set to Camp Lejeune.    **Figure 62: Screen Capture of CT Edit – VE Protocol Screen** |
| 2.6.7.3.2 | The Billing Info Edit (BI) protocol of the CT Edit Screen shall be updated to allow  an RNB of “Camp Lejeune Treatment” to be assigned to an event.  **Note 1:** The Billing Info Edit protocol is accessed through Menu option:  *CT Edit* [IBT EDIT TRACKING ENTRY].  **Note 2:** At the time of this writing, the RNB of Camp Lejeune Treatment has already been added as a file entry. |
| 2.6.7.4 | Camp Lejeune Related Prescriptions shall be added in VistA IB Claims Tracking. |
| 2.6.7.4.1 | Prescriptions that are identified as related to Camp Lejeune in Outpatient Pharmacy shall be added to CT with a Reason Not Billable of "Camp Lejeune Treatment". |
| 2.6.7.4.1.1 | Two processes are run to add Outpatient Prescriptions to CT and shall include the ability to identify Camp Lejeune eligible related prescriptions:  1. Automated process (generally scheduled to run nightly).  Queue Means Test Compilation of Charges  [IB MT NIGHT COMP]  2. User initiated menu option:  *Manually Add Rx Refills to CT*  [IBT SUP MANUALLY QUE RX FILLS] |
| 2.6.7.5 | Camp Lejeune Related Outpatient Encounters shall be added in VistA IB Claims  Tracking. |
| 2.6.7.5.1 | Encounters that are identified as related to Camp Lejeune in PCE shall be added to CT with a Reason Not Billable of "Camp Lejeune Treatment". |
| 2.6.7.5.1.1 | Two processes are run to add Outpatient Encounters to CT and shall be updated to include the ability to identify Camp Lejeune related outpatient encounters: |

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| **Req. ID** | **Requirement Text** |
|  | 1. Automated process (generally scheduled to run nightly): Queue Means Test Compilation of Charges  [IB MT NIGHT COMP]  2. User initiated menu option:  *Manually Add Opt. Encounters to CT*  [IBT SUP MANUALLY QUE ENCTRS] |
| 2.6.7.5.2 | When the *Manually Add Opt. Encounters to CT* process completes, a CT bulletin is sent with a summary of the results. The CT bulletin shall be updated to  account for Camp Lejeune related encounters added to CT. |
| 2.6.7.5.2.1 | In the “Outpatient Encounters added to the Claims Tracking Complete” bulletin, each Camp Lejeune associated outpatient encounter shall add to the “Total Non- billable Encounters Added” count value.    **Figure 63: Screen Capture of Manually Add Opt. Encounters to CT – Summary**  **Bulletin Screen** |
| 2.6.7.6 | Camp Lejeune shall be added to the Hospital Reviews Display in VistA IB Claims  Tracking. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.6.1 | The VE protocol of the Hospital Review Screen shall be updated to include the  Camp Lejeune environmental indicator.  **Note:** The menu option that displays the Camp Lejeune EI:  *Hospital Reviews* [IBT EDIT REVIEWS]    **Figure 64: Screen Capture of Expanded Hospital Review Screen** |
| 2.6.7.7 | Camp Lejeune shall be added to the Appeals/Denials Display in VistA IB Claims  Tracking. |
| 2.6.7.7.1 | The VE protocol of the Appeal and Denial screen shall be updated to include the  Camp Lejeune environmental indicator.  **Note:** The menu option that displays the Camp Lejeune EI: *Appeal/Denial Edit*  [IBT EDIT APPEALS/DENIALS]    **Figure 65: Screen Capture of CT Appeals/Denials Screen** |
| 2.6.7.8 | Camp Lejeune shall be added to the Print CT Summary for Billing option in VistA IB Claims Tracking. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.8.1 | The *Bill Preparation Report* shall be updated to display Camp Lejeune when related to an encounter, as it already does with other classifications.  **Note:** The report menu option that displays the report:  *Print CT Summary for Billing*  [IBT OUTPUT BILLING SHEET]    **Figure 66: Screen Capture of Bill Preparation Report Screen** |
| 2.6.7.9 | Camp Lejeune shall be added to the Inquire to CT Report option in VistA IB. |
| 2.6.7.9.1 | *Claim Tracking Inquiry* shall be updated to display Camp Lejeune when related to an encounter, as it already does with other classifications.  **Note:** The report menu option that displays the report:  *Inquire to CT*  [IBT OUTPUT CLAIM INQUIRY]    **Figure 67: Screen Capture of Claim Tracking Inquiry Screen** |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.10 | Camp Lejeune Events shall be excluded from Third Party AutoBiller in VistA IB. |
| 2.6.7.10.1 | The Third Party AutoBiller creates bills based on the encounters in CT. Before a third party bill is created, the billable status of the encounter is re-checked to determine if the encounter is still billable. The AutoBiller shall be updated to screen out and not bill any encounters identified as related to Camp Lejeune.  **Note:** The background job behind the AutoBiller: Queue Means Test Compilation of Charges  [IB MT NIGHT COMP] |
| 2.6.7.11 | Camp Lejeune Outpatient Encounters shall be excluded from Reports in VistA Third Party IB. |
| 2.6.7.11.1 | Camp Lejeune Outpatient Encounters shall be excluded from the Unbilled  Amounts Report. |
| 2.6.7.11.1.1 | The Unbilled Amounts Report identifies Inpatient, Outpatient, and Prescription events that are potentially billable but that have not yet been billed. This report  shall screen out all unbilled events identified as related to a Veteran’s Camp  Lejeune billing exemption.  **Note:** The Unbilled Amounts Report is generated from the following menu option:  *Re-Generate Unbilled Amounts Report*  [IBT RE-GEN UNBILLED REPORT]    **Figure 68: Screen Capture of Unbilled Amounts Report Screen** |
| 2.6.7.11.2 | Camp Lejeune Related Encounters shall be excluded on the Outpatient  Encounter Workload Report in VistA IB. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.11.2.1 | The Outpatient Encounter Workload Report provides a measure of outpatient services provided at a VA medical facility. The report screens out any encounter related to a special billing classification exemption. This report shall be updated to screen out outpatient services identified as Camp Lejeune related.    **Figure 69: Screen Capture of Outpatient Encounter Workload Report Screen –**  **Page 1 of 2**    **Figure 70: Screen Capture of Outpatient Encounter Workload Report Screen –**  **Page 2 of 2**  **Note:** The Outpatient Encounter Workload Report is generated from the following menu option:  *IBJD INTAKE OPT WORKLOAD* |
| 2.6.7.11.3 | Camp Lejeune shall be added to Reasons Not Billable Report in VistA IB. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.11.3.1 | This option prints a list of CT entries that cannot be billed to an insurance company for various reasons. The RNB of Camp Lejeune shall be added to both detail and summary versions of the RNB report.  **Note:** The Reasons Not Billable Report is generated from the following menu option:  Diagnostic Measures >> Billing Reports  *UA Reasons Not Billable Report*  [IBJD REASONS NOT BILLABLE]    **Figure 71: Screen Capture of Reasons Not Billable Report – Detail Version Screen**    **Figure 72: Screen Capture of Reasons Not Billable Report - Summary Version**  **Screen** |
| 2.6.7.11.4 | MailMan Message shall be modified for Required Exemption Flags in VistA IB. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.11.4.1 | If a Veteran’s eligibility changes related to Camp Lejeune indicator (either added or removed), the IB Means test MailMan messages shall be updated to include Camp Lejeune. |
| 2.6.7.12 | Camp Lejeune shall be added to Special Inpatient Cases in VistA IB.  **Note:** When a patient is admitted as an inpatient and has any claimed classifications (e.g., SC/EI), then a Special Inpatient Billing Case is created so the event can be tracked until the classification is determined. The Special Inpatient Billing Cases are patients who have some classification that would exempt them from First Party Billing, but at the point the event is created it is unknown if the care is related to that classification. Records of these events are placed in Special Inpatient Billing list to be processed when the care classification is properly identified and billing can be manually completed. |
| 2.6.7.12.1 | Special Inpatient cases shall be updated to accommodate the classification for  Camp Lejeune eligibility.  **Note:** Special Inpatient cases awaiting resolution are stored in the SPECIAL INPATIENT BILLING CASES File (#351.2). The Patient Type field (#.03) shall be updated to include Camp Lejeune as a claimed classification. |
| 2.6.7.12.2 | On admission, if the patient has any claimed classification, then a Special Inpatient Billing Case is created so the event can be tracked until the classification is determined. Creating a new Inpatient Billing case shall be updated to include Camp Lejeune as a claimed classification.  **Note:** When a patient is admitted/transferred/discharged the DGPM Movement Events Protocol initiates the IB Means Test Billing Protocol to create a special inpatient case. |
| 2.6.7.12.3 | Special Inpatient Billing Case Bulletin shall be modified in VistA IB. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.12.3.1 | A bulletin is sent when a Special Inpatient Billing Case patient is admitted or discharged. This bulletin includes the Classification reason the patient is a Special Inpatient Billing Case and shall be updated to include Camp Lejeune as the claimed classification.    **Figure 73: Screen Capture of Special Inpatient Billing Case Bulletin Screen** |
| 2.6.7.13 | Camp Lejeune shall be added to the Disposition Special Inpatient Billing Cases in VistA IB. |
| 2.6.7.13.1 | The Disposition Special Inpatient Billing Cases screen shall be updated to process cases with Camp Lejeune as the claimed classification.  **Note:** Dispositioning a Special Inpatient case is performed within the following menu option:  *Disposition Special Inpatient Billing Cases*  [IB MT DISP SPECIAL CASES] |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.13.1.1 | The introductory text for the Disposition Special Inpatient Billing Cases screen shall be updated to include Camp Lejeune.    **Figure 74: Screen Capture of Introductory Text for the Disposition of Special**  **Inpatient Billing Cases Screen**    **Figure 75: Screen Capture of Disposition of Special Inpatient Billing Cases Screen** |
| 2.6.7.14 | Add Camp Lejeune to the Special Inpatient Billing Cases Report in VistA IB. |
| 2.6.7.14.1 | The List All Special Inpatient Billing Cases report option lists all the Special Inpatient Billing cases. This report shall be updated to include all cases with Camp Lejeune as the claimed classification.  **Note:** The Special Inpatient listing report is run from the following menu option:  *List Special Inpatient Billing Cases*  [IB MT LIST SPECIAL CASES]    **Figure 76: Screen Capture of List All Special Inpatient Billing Cases Screen** |
| 2.6.7.15 | Camp Lejeune events shall be excluded from First Party AutoBiller in VistA First  Party IB. |
| 2.6.7.15.1 | The first time Outpatient Encounters are Checked Out, new First Party bills are automatically created. The classifications identified with the encounter are |

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| **Req. ID** | **Requirement Text** |
|  | checked to first determine if the encounter is billable. The system shall be updated to include the new Camp Lejeune classification. If the new encounter is  related to Camp Lejeune eligibility then the AutoBiller shall not create a new bill.  **Note:** The AutoBiller runs the IB MT NIGHT COMP job to process first party bills.  The SDAM Appointment Event Driver is run and then initiates the IB Link to Scheduling Protocol to process the Outpatient Encounter for billing. |
| 2.6.7.15.2 | When Outpatient Encounters are Edited or Changed, new First Party bills are automatically created. The classifications identified with the encounter are checked to determine if they have changed in a way that may affect the billable status of the edited encounter. The system shall filter from the AutoBiller any updated events related to Camp Lejeune. |
| 2.6.7.15.2.1 | When an encounter is changed to now be related to Camp Lejeune, then any existing First Party bill shall be cancelled. If cancelled, the appropriate Camp Lejeune Charge Removal Reason shall be added. |
| 2.6.7.15.2.2 | If the encounter is changed so it is no longer related to Camp Lejeune, then a bill may be created.  **Note 1:** The IB CHARGE REMOVE REASONS file (#350.3) contains the  reasons an IB Action may be cancelled. A new Charge Removal Reason shall be added to File #350.3 to identify and track charges cancelled due to Camp Lejeune with an abbreviation of “CL”.  **Note 2:** The SDAM Appointment Event Driver is run and then initiates the IB Link to Scheduling Protocol to process the Outpatient Encounter for billing. |
| 2.6.7.16 | Means Test Back-billing Support for Income Verification Matching (IVM) shall be excluded in First Party IB. |
| 2.6.7.16.1 | When Means Tests are added/updated from IVM, the Means Test Event Driver is run and then initiates the IB Edit a Means Test Event protocol to process the patient and perhaps bill based on the changed Means Test. The system shall be updated to filter from the AutoBiller any events related to Camp Lejeune. |
| 2.6.7.17 | The Outpatient Encounters Exempt from Classification Questions Bulletin shall be modified in First Party IB.  **Note:** It is possible that there may be encounters that are exempt from being asked the Classification questions but whose patient has claimed service connection or environmental exposure or non-billable status. If an encounter was exempt from the classification questions but the patient claims exposure, then a bulletin is sent to notify billing clerks that the encounter was billed and must be checked to determine if the claimed exposure is related and therefore the bill cancelled. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.17.1 | The bulletin sent for classifications exempt but claimed exposure shall be updated to identify Camp Lejeune as a non-billable claimed exposure.    **Figure 77: Screen Capture of Outpatient Encounters Exempt from Classification**  **Questions Bulletin Screen** |
| 2.6.7.18 | The cancellation of First Party Bills shall be modified in IB. |
| 2.6.7.18.1 | Cancellation actions can be added for First Party bills, using the IB Charge  Remove Reasons to identify the reason for the cancellation. The Charge  Remove Reasons shall be updated to allow cancellation due to “Camp Lejeune”.  **Note:** The following 2 menu options can be used to add cancellation charges:  1. *Cancel/Edit/Add Patient Charges*  [IB CANCEL/EDIT/ADD CHARGES]  2. *Release Charges 'Pending Review'*  [IB MT REV PEND CHARGES] |
| 2.6.7.19 | Camp Lejeune Classification and Charge Removals shall be identified on First  Party Reports |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.19.1 | The “Means Test/LTC Outpatient and Registration Activity” (Long Term Care) report shall be enhanced to identify the Camp Lejeune classification when assigned to a patient, particular encounter, registration, or observation event.  **Note:** The “Means Test/LTC Outpatient and Registration Activity” report is run  from the menu option:  *EVNT Outpatient/Registration Events Report*  [IB OUTPUT EVENTS REPORT]    **Figure 78: Screen Capture of Means Test/LTC Outpatient and Registration Activity**  **Report Screen** |
| 2.6.7.19.2 | The “Patient Billing Inquiry” report lists the charges for a patient and includes cancelled charges with the Charge Removal Reason. The report shall be updated to include the new Camp Lejeune Charge Removal Reason.    **Figure 79: Screen Capture of Patient Billing Inquiry Report Screen**  **Note:** The “Patient Billing Inquiry” report is run from the menu option:  *INQU Patient Billing Inquiry*. |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.19.3 | The “Means Test Billing Profile” report lists the Means Test charges for a patient and includes cancelled charges with the Charge Removal Reason. The report shall be updated to include the new Camp Lejeune Charge Removal Reason of “CAMP LEJEUNE”.  **Note:** The “Means Test Billing Profile” report is run from the menu option:  *PROF Single Patient Means Test Billing Profile*  [IB MT PROFILE]    **Figure 80: Screen Capture of Means Test Billing Profile Report Screen** |
| 2.6.7.19.4 | The “LTC Billing Profile” report lists all long term care bills within a specified time period and contains any cancelled charges with the Charge Removal Reason. The report shall be updated to include the new Camp Lejeune Charge Removal Reason.  **Note:** The “LTC Billing Profile” report is run from the menu option:  *PROL LTC Single Patient Billing Profile*  [IBAEC LTC BILLING PROFILE]    **Figure 81: Screen Capture of LTC Billing Profile Report Screen** |

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| **Req. ID** | **Requirement Text** |
| 2.6.7.19.5 | The “GMT Single Patient Report” provides the GMT (Geographic Means Test) charges for a patient within a specified time period and contains cancelled charges with the Charge Removal Reason. The report shall be updated to include the new Camp Lejeune Charge Removal Reason.  **Note:** The “GMT Single Patient Report” report is run from the menu option:  *GMT Single Patient Report* [IB GMT SINGLE PATIENT REPORT].    **Figure 82: Screen Capture of GMT Single Patient Report Screen** |
| 2.6.7.20 | Billing in the National Council for Prescription Drug Programs (NCPDP) IB  module shall be modified.  **Note:** Within IB a module exists as an interface with Electronic Claims Management Engine (ECME) and ePharmacy that determines the billable status of a prescription and maintains the existing billing database for bills processed through ePharmacy. This module shall be updated to accommodate Camp Lejeune as an additional billing exempt classification. |
| 2.6.7.20.1 | The IB BILLING DETERMINATION process shall be updated to accommodate new outpatient prescriptions to support the addition of the Camp Lejeune exemption in VistA IB NCPDP.  **Note:** The routines that are run for prescription billing determinations (IBNCPCP and IBNCPUT2) shall be updated to include the Camp Lejeune reason for billing exemption. |
| 2.6.7.20.2 | ECME Billing Events with Camp Lejeune shall be added in IB NCPDP. |
| 2.6.7.20.2.1 | The process that stores outpatient pharmacy events processed through ECME and ePharmacy to the IB ECME Billing Events log shall be updated to store pharmacy events related to the Camp Lejeune classification.  **Note:** The IB ECME Billing Events Log is stored in the IB NCPDP EVENT LOG (File #366.14); EVENT File (#1); Camp Lejeune field (#.409). |
| 2.6.7.20.3 | Pharmacy/ECME Prescription Billable Status Check shall be excluded in IB NCPDP. |
| 2.6.7.20.3.1 | When the ECME interface makes an inquiry to IB to determine if a particular prescription is billable, the response to the inquiry shall return Camp Lejeune as the reason the Rx is not billable if the prescription is classified as related to Camp Lejeune and the Veteran is currently eligible for the Camp Lejeune |

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
|  | exemption. |
| 2.6.7.20.4 | ECME Billing Events Report shall be modified in IB NCPDP. |
| 2.6.7.20.4.1 | The “Billing ECME Events” report contains indication of the classification of individual prescription events and shall be updated to display Camp Lejeune if applicable to the outpatient pharmacy billing event. Both the detail and summary report version shall include Camp Lejeune eligibility.  **Note:** The following menu option runs the ECME Billing Events Report:  *EVNT ECME Billing Events Report*.    **Figure 83: Screen Capture of Billing ECME Events Report – Detail Version Screen**    **Figure 84: Screen Capture of Billing ECME Events Report - Summary Version**  **Screen** |
| 2.6.7.21 | Assign Reason Not Billable to an event shall be added in VistA IB. |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.7.21.1 | The Assign Reason Not Billable screen shall allow the VistA user to manually  assign “Camp Lejeune Treatment” as a non-billing event reason.  **Note:** At the time of this writing, the RNB of Camp Lejeune Treatment has been added to the list of non-billable reasons.    **Figure 85: Screen Capture of Assign Reason Not Billable Screen** |
| 2.6.7.21.2 | The Patient Eligibility screen shall be updated to include the Camp Lejeune environmental indicator. The current value of the Camp Lejeune indicator when answered as “Yes” in the person’s VHA registration record shall be displayed as “Yes”; or, if the Camp Lejeune eligibility question is answered “No” or is currently unanswered, the value shall be shown as blank (i.e., white space).  **Note:** The Patient Eligibility screen is accessed from the “EL Patient Eligibility”  protocol from the following menu option:  *THIRD PARTY JOINT INQUIRY* [IBJ THIRD PARTY JOINT INQUIRY]    **Figure 86: Screen Capture of Patient Eligibility Screen** |

2.6.8

**Radiology**

**Table 9: Functional Requirements for Radiology**

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.8.1 | The Radiology application shall display the patient’s Service Connected (SC) and environmental indicators, to include the current value of the Camp Lejeune eligibility, at the time of exam order entry when the menu option “Request an Exam” is selected.    **Figure 87: Screen Capture of Request An Exam Screen** |

2.6.9

**Clinical Procedures**

Clinical Procedures (CP) passes final patient results, using HL7 messaging, between vendor

Clinical Information Systems (CIS) and VistA.

Updates for Camp Lejeune will be implemented within the hemodialysis module of the Clinical Procedures application. Hemodialysis is a module of the CP package that provides features specific to hemodialysis treatment. Hemodialysis allows users to collect hemodialysis treatment information from a medical device and manually enter treatment data into the application.

**Table 10: Functional Requirements for CP**

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.9.1 | Hemodialysis users shall be able to view a patient’s Camp Lejeune eligibility on  the hemodialysis summary screen. |
| 2.6.9.2 | The value of the Camp Lejeune information on the Summary screen shall be  based on a patient’s current profile in Patient Care Encounter.    **Figure 88: Screen Capture of Hemodialysis Summary Screen** |
| 2.6.9.2.1 | If the Veteran is Camp Lejeune Eligible, the data value on the Hemodialysis Summary Screen shall be ‘Yes’ or ‘No’ to indicate if the treatment was related to Camp Lejeune water contaminant exposure. |
| 2.6.9.2.2 | If the Veteran is NOT Camp Lejeune Eligible, the value displayed on the  Hemodialysis screen shall be “n/a”. |

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.9.3 | Hemodialysis users shall be able to update the Camp Lejeune Exposure indicator via selecting the service tab from the Summary Screen.    **Figure 89: Screen Capture of Hemodialysis Service Screen** |
| 2.6.9.3.1 | The Camp Lejeune radio button group shall be enabled if and only if the  Veteran is Camp Lejeune Eligible based on data received from PCE via an API. |
| 2.6.9.3.2 | In the Hemodialysis service screen a response to an enabled Camp Lejeune radio button group shall be required. |
| 2.6.9.3.3 | When the Hemodialysis record is saved, the data shall be saved to PCE. |
| 2.6.9.3.3.1 | When the Hemodialysis data is saved, the user shall then be returned to the Summary Screen where updates made to the Camp Lejeune Exposure shall be displayed. |
| 2.6.9.3.3.2 | When the Hemodialysis data is saved, the title bar shall indicate that PCE data has been updated to include Camp Lejeune.    **Figure 90: Screen Capture of Hemodialysis Title Bar After Updates** |

2.6.10

**Clinical Reminders**

Clinical Reminders (CR) may be used for both clinical and administrative purposes. However, the primary goal is to provide relevant information to providers at the point of care, for improving care for Veterans. The package benefits clinicians by providing pertinent data for clinical decision-making, reducing duplicate documenting activities, assisting in targeting patients with particular diagnoses, procedures, or site-defined criteria, and assisting in compliance with VHA performance measures and with Health Promotion and Disease Prevention guidelines.

**Table 11: Functional Requirements for CR**

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.10.1 | A National Computed Finding shall be created for Camp Lejeune. |
| 2.6.10.1.1 | A National Computed Finding for Camp Lejeune indicator “YES” (VA-CAMP LEJEUNE similar to Agent Orange) shall be created within the Clinical Reminders software for Clinical use, Clinical reporting, and tracking clinical care. |

2.6.11

**Computerized Patient Record System (CPRS)**

CPRS is a VistA application GUI that enables users to enter, review, and update all patient information. With CPRS, users can order lab tests, medications, diets, radiology tests and procedures, record patient allergies or adverse reactions to medications, request and track consultations, enter progress notes, diagnoses, treatments, and discharge summaries for each patient encounter. In addition, CPRS supports clinical decision-making and enables users to review and analyze patient data.

**Note:** The CPRS GUI is updated to support the Camp Lejeune indicator as of CPRS v30b.

User Interface controls on the following three screens are updated to include Camp

Lejeune prompts or responses in the CPRS GUI:

 Sign Orders Pop Up screen (for Outpatient Medication Orders)

 Order Details screen

 Encounter Form (Visit Related) in the Notes tab

 Problem List Screen

 See section 2.6.18 of this RSD for Problem List requirements.

**Table 12: Functional Requirements for CPRS**

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.11.1 | The CPRS Encounter form shall be enhanced to Collect, Display, and Store  Camp Lejeune Eligibility. |
| 2.6.11.1.1 | The CPRS Encounter Form screen shall be modified to allow the ability to indicate the Camp Lejeune status for a visit. |
| 2.6.11.1.2 | CPRS shall use the Veteran’s VHA registration record to determine if the  Veteran is eligible for Camp Lejeune status for an encounter. |
| 2.6.11.1.2.1 | The Camp Lejeune indicator on the CPRS encounter form shall be enabled if the patient has Camp Lejeune status eligibility. |
| 2.6.11.1.2.2 | The Camp Lejeune indicator, if enabled, shall allow the CPRS user to indicate  Yes, No, or leave blank (it is not a required field). |
| 2.6.11.1.2.3 | The Camp Lejeune indicator on the CPRS encounter form shall be disabled if the patient does not have Camp Lejeune status eligibility. |
| 2.6.11.1.3 | The Camp Lejeune status for a visit as collected on the CPRS encounter form shall be passed to the VistA PCE application for storage. |

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| **Req. ID** | **Requirement Text** |
| 2.6.11.2 | CPRS Outpatient Medication Orders shall be enhanced to Collect, Display, and  Store Camp Lejeune Eligibility. |
| 2.6.11.2.1 | The CPRS Sign Orders screen shall be modified to allow the ability to indicate if the Outpatient Medication prescription being prescribed is due to a Veteran’s Camp Lejeune related condition. |
| 2.6.11.2.2 | The CPRS Sign Orders screen shall include “mouse hover” context sensitive  help text for the Camp Lejeune prompt. |
| 2.6.11.2.2.1 | The context sensitive help text for the “mouse hover” of the Camp Lejeune  prompt on the CPRS Sign Orders screen will be as follows:  Camp Lejeune (CL): Veterans with conditions associated with exposure to water contaminants at Camp Lejeune North Carolina from August 1, 1953 through December 31, 1987 are eligible for enrollment in priority group 6, unless eligible for enrollment in a higher priority. Veterans receive VA services at no charge for medical care and medications for treatments associated to Camp Lejeune water contaminant related conditions.    **Figure 91: Screen Capture of Mouse Hover Context Sensitive Help on the Sign**  **Orders screen**  (Agent Orange is used as an example) |
| 2.6.11.2.3 | CPRS shall use the Veteran’s VHA registration record to determine if the  Veteran is eligible for Camp Lejeune status for an Outpatient medication order.  **NOTE:** If the patient is not eligible (via their VHA Registration record) for VA medical services based on their service connected status nor any of the eight environmental factors, the CPRS GUI Sign Orders screen shall  not display the SC/EI prompts. |
| 2.6.11.2.3.1 | If a Veteran is eligible for the Camp Lejeune classification, the provider shall be asked to indicate, at the time an outpatient medication order is being signed in CPRS, if the order is for a condition related to exposure of water contaminants at Camp Lejeune. |
| 2.6.11.2.3.2 | The Camp Lejeune indicator on the CPRS Sign Orders screen shall be enabled and requires a response (i.e., check/uncheck of the Camp Lejeune checkbox) if the patient has Camp Lejeune eligibility status. |
| 2.6.11.2.3.3 | The Camp Lejeune indicator on the CPRS Sign Orders screen shall be blank (i.e., no value) and disabled if the patient does not have Camp Lejeune eligibility status. |

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| **Req. ID** | **Requirement Text** |
| 2.6.11.2.4 | The CPRS GUI shall collect the Camp Lejeune status for applicable outpatient medication orders at the time of provider signature.  **Note:** The Orders File (#100) shall be modified to add the Camp Lejeune status for Outpatient Medication orders. |
| 2.6.11.2.5 | The Camp Lejeune classification status of an outpatient medication order shall be passed to the VistA Outpatient Pharmacy application for storage.  **Note:** Pending outpatient prescription orders from CPRS are stored in the PENDING OUTPATIENT ORDERS File (#52.41). This pending file is used to store signed orders temporarily until they are processed in VistA by the pharmacist. |
| 2.6.11.2.6 | The Order Details screen in CPRS shall be updated to include “Camp Lejeune  Exposure” when the provider has signed the order and indicated the prescription is related to the patient’s Camp Lejeune water contaminant exposure condition.    **Figure 92: Screen Capture of Order Details screen** |

2.6.12

**Event Capture**

The EC (Event Capture) GUI (Graphical Use Interface) provides a mechanism to track and account for procedures and delivered services that are not handled in other VistA packages. Procedures are those associated with the patient, the provider who requested the service, and the Managerial Cost Accounting (MCA) system unit responsible for delivering the care.

**Table 13: Functional Requirements for EC**

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.12.1 | The CL Environmental Classification Indicator is a new indicator that shall be displayed on the following Event Capture GUI screens:   Add Patient Procedure Screen   Edit Patient Procedure Screen   Same Procedure, Multiple Patients Screen   Multiple Dates/Multiple Procedures Screen   View Patient Record Details Screen |
| 2.6.12.2 | Event Capture users shall only be allowed to select the Camp Lejeune Environmental Classification Indicator for Veterans that are eligible for this benefit. |
| 2.6.12.2.1 | A new field shall be created in VistA to store the Camp Lejeune response from the EC GUI.  **Note:** Data shall be stored in the EVENT CAPTURE PATIENT File (#721) and passed to PCE via an existing API. |
| 2.6.12.3 | Requirement removed per RTC #231201. Requirement ID retained as a placeholder. |
| 2.6.12.4 | The Add/Edit Patient Procedure Screen shall be enhanced.  **NOTE:** The Add or Edit functionality uses the same screen. |
| 2.6.12.4.1 | The Camp Lejeune Environmental Classification Indicator shall be added to the  Add/Edit Patient Procedure Detailed screen. |
| 2.6.12.4.2 | “Camp Lejeune?” shall display on the second row of the Add/Edit Patient Procedure Detail Screen following the Environmental Classification question for Project 112/SHAD? |

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| **Req. ID** | **Requirement Text** |
| 2.6.12.4.3 | In the EC Add/Edit Patient Procedure Detailed screen, the user must select  “YES” or “NO” for the Camp Lejeune Classification indicator if it is enabled.    **Figure 93: Screen Capture of Event Capture - Add Patient Procedure Screen** |
| 2.6.12.5 | The Same Procedure, Multiple Patients Screen shall be enhanced. |
| 2.6.12.5.1 | The Camp Lejeune Environment Classification Indicator shall be added to the  Same Procedure, Multiple Patients screen. |
| 2.6.12.5.2 | “Camp Lejeune?” shall display on the third row of the Same Procedure, Multiple Patients screen following the Environmental Classification question for Proj112/SHAD? |

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| **Req. ID** | **Requirement Text** |
| 2.6.12.5.3 | If the “Camp Lejeune?” field is enabled on the Same Procedure, Multiple Patients  screen, users shall be required to select “YES” or “NO”.    **Figure 94: Screen Capture of Event Capture - Same Procedure, Multiple Patients**  **Screen** |
| 2.6.12.6 | The Multiple Dates/Multiple Procedures Screen shall be enhanced. |
| 2.6.12.6.1 | The Camp Lejeune Environment Classification Indicator shall be added to the  Multiple Dates/Multiple Procedures screen. |
| 2.6.12.6.2 | “Camp Lejeune?” shall display on the second row of the Multiple Dates/Multiple Procedures screen following Environmental Classification question for Proj112/SHAD? |

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| **Req. ID** | **Requirement Text** |
| 2.6.12.6.3 | When the “Camp Lejeune?” indicator field is enabled, users shall be required to  select “YES” or “NO”.    **Figure 95: Screen Capture of Event Capture – Multiple Dates / Multiple Procedures**  **Screen** |
| 2.6.12.7 | The Event Capture View Patient Record Details Screen shall be enhanced. |
| 2.6.12.7.1 | The Camp Lejeune Environment Classification Indicator shall be added to the  View Patient Record Details screen. |
| 2.6.12.7.2 | The Camp Lejeune field shall display on the fourth row of the View Selected Patients tab below the “Project 112/SHAD?” classification field and shall follow next in the tab order directly after the “Project 112/SHAD?” field. |
| 2.6.12.7.3 | “Camp Lejeune?” shall be a non-editable field on the View Patient Record Details screen. |

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| **Req. ID** | **Requirement Text** |
| 2.6.12.7.4 | The default value of “N/A” shall be displayed if the Camp Lejeune Classification indicator was not previously entered in EC.  **Note:** The circled numbers in the screen shot below demonstrate the tab order of the fields within this section.    **Figure 96: Screen Capture of Event Capture - View Patient Record Details Screen** |

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.12.7.5 | Camp Lejeune shall be added to the Patient Details pop-up screen in Event  Capture.    **Figure 97: Patient Details - 508/JAWS screen**  **Note 1:** This screen is used so that JAWS can read information displayed on the View Patient Record Details screen that was otherwise unreadable by JAWS after the conversion to Delphi XE3.  **Note 2:** This pop-up screen is visible only if a user has JAWS installed and  running. |

2.6.13

**Managerial Cost Accounting (MCA)**

The VistA MCA system provides a means of exporting data from selected VistA software modules and transmitting it to the AITC. This transfer is accomplished through a set of extract routines, intermediate files, audit reports, transmission, and purge routines. MCA uses VA MailMan to transmit data to software resident at AITC.

**Note:** MCA was formerly known as the Decision Support System (DSS).

**Table 14: Functional Requirements for MCA**

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| **Req. ID** | **Requirement Text** |
| 2.6.13.1 | Camp Lejeune data shall be available for MCA extracts via two Application  Programming Interfaces (APIs):  1. ^PXAPI  2. ^VADPT |

2.6.14

**Prosthetics**

The VistA Prosthetics package is determined to be out of scope as of 3/6/2015.

2.6.15

**LAB**

The VistA LAB package is determined to be out of scope as of 3/6/2015.

2.6.16

**Surgery**

The VistA Surgery package is determined to be out of scope as of 3/6/2015.

2.6.17

**Fee Basis**

The VistA Fee Basis (FB) package is determined to be out of scope as of 3/6/2015.

2.6.18

**Problem List**

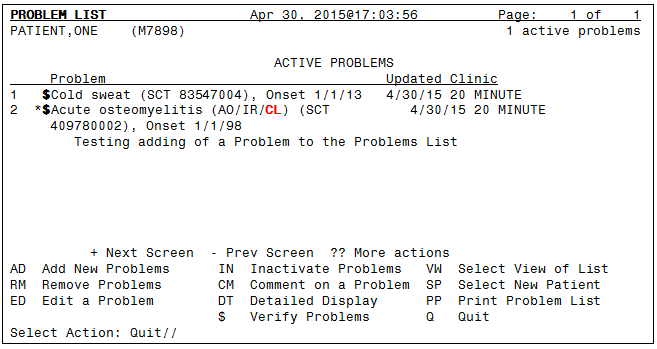
The Problem List application is used to document and track a patient’s problems. It provides clinicians with a current and historical view of a patient’s healthcare problems, and allows each identified problem to be traced through the VistA system in terms of treatment, test results, and outcome.

The Problem list application supports primary care providers in both inpatient and Ambulatory Care settings, including physicians, nurses, social workers, psychologists, and others. It also is designed to be used by Patient Information Management System (PIMS) clinic and ward clerks and by PIMS coding clerks.

**Table 15: Functional Requirements for Problem List**

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.18.1 | Camp Lejeune status shall be displayed, collected, and stored in CPRS Problems Tab. |
| 2.6.18.1.1 | If a Veteran is eligible for the Camp Lejeune classification, the provider shall be prompted to indicate, at the time of creating or editing a problem for a Veteran, if the problem is a condition related to exposure to Camp Lejeune water contaminants. |
| 2.6.18.1.2 | CPRS shall use the Veteran’s VHA registration record to determine if the Veteran is eligible for Camp Lejeune status for an item within the Veteran’s Problem List. |
| 2.6.18.1.2.1 | If the patient has Camp Lejeune status eligibility, the Camp Lejeune indicator on the Problem List screen in CPRS shall be enabled. A response shall not be required. |
| 2.6.18.1.2.2 | The Camp Lejeune indicator on the Problem List screen in CPRS shall be disabled if the patient does not have Camp Lejeune status eligibility. |
| 2.6.18.1.3 | The Camp Lejeune classification status of a problem in CPRS shall be passed to the Problem List VistA application for storage. |

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| **Req. ID** | **Requirement Text** |
| 2.6.18.1.4 | The CPRS GUI shall collect the Camp Lejeune status for problems within a  Veteran’s Problem List at the time of saving a new or updated problem.  **Note 1:** The Camp Lejeune relationship to a problem shall be stored in a new  Field #1.19 (CAMP LEJEUNE) within the Problem File #9000011.  **Note 2:** The CPRS GUI, within the Problem tab, is updated to support the Camp Lejeune indicator as of CPRS v30b. User Interface controls on the Problem List screen is updated to include Camp Lejeune prompts in the CPRS GUI:   Problem List Screen    **Figure 98: Screen Capture of CPRS Problem List Showing Treatment Factors** |
| 2.6.18.2 | Camp Lejeune status shall be displayed, collected, and stored in the VistA Problem List Application. |
| 2.6.18.3 | The Camp Lejeune indicator “CL” shall be shown when related to a patient’s problem within the Patient’s Problem List screen. |
| 2.6.18.3.1 | Camp Lejeune when indicated as related to a problem shall always be displayed in the last position in relation to the other environmental indicators in the Problem List Screen. |



|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
|  | **Figure 99: Screen Capture of Problem List – VistA Application Screen**  **Note:** The Problem List display screen is run from the following menu option:  *Patient Problem List*  [GMPL CLINICAL USER]    **Figure 100: Screen Capture of Problem List Data Entry Display - VistA Application**  **Screen**  **Note 1:** The Problem List Data Entry display is run from the following menu option:  *Problem List Data Entry*  [GMPL DATA ENTRY]  **Note 2:** The Exposure column of the Problem List Data Entry screen displays the first environmental indicator that is related to a problem. Since “Camp Lejeune” is considered last in the position of the environmental indicators, it shall be displayed if it is the only EI related to the problem. |

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.18.4 | The Camp Lejeune indicator shall be shown in the Detailed Display of a problem when indicated that the patient’s problem is associated to the patient’s Camp Lejeune eligibility.    **Figure 101: Screen Capture of Problem List Detailed Display – VistA Application**  **Note:** The detailed display screen of a problem is accessed via the Problem List  screen using the ‘DT Detailed Display’ protocol. |
| 2.6.18.5 | The VistA Problem List application shall use the Veteran’s VHA registration record to determine if the Veteran is eligible for Camp Lejeune status for an item within the Veteran’s Problem List. |
| 2.6.18.6 | The Camp Lejeune exposure question shall be displayed to prompt for a response when adding a new or editing an existing problem when the Veteran is Camp Lejeune eligible. |
| 2.6.18.7 | The Camp Lejeune exposure prompt question shall not be displayed when adding a new or editing an existing problem when the Veteran is not Camp Lejeune eligible.  **Note:** A Patient is determined to be Camp Lejeune eligible when their Camp  Lejeune indicator is set to ‘Yes’ in the VistA Patient File (# 2). |
| 2.6.18.7.1 | The text of Camp Lejeune prompt question in VistA Problem List when editing or adding a problem shall be as follows:  Is this problem related to CAMP LEJEUNE WATER CONTAMINANT EXPOSURE? |

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| --- | --- |
| **Req. ID** | **Requirement Text** |
| 2.6.18.7.2 | The Camp Lejeune prompt question shall be the last question prompted for in relation to the other environmental questions.    **Figure 102: Screen Capture of Edit an Existing Problem in a Patient’s Problem**  **List Screen**  **Note:** The edit screen for an existing problem is accessed via the Problem List  screen using the ‘ED Edit a Problem’ protocol.    **Figure 103: Screen Capture of Add a New Problem to a Patient’s Problem List**  **Screen**  **Note:** The add screen for a new problem is accessed via the Problem List  screen using the ‘AD Add New Problems’ protocol. |
| 2.6.18.7.3 | The Camp Lejeune exposure prompt question, when presented, shall not require a response, but when answered shall only be answered as “Yes” or |

|  |  |
| --- | --- |
| **Req. ID** | **Requirement Text** |
|  | “No”. |
| 2.6.18.7.3.1 | If the user does not respond with a “Yes” or “No” to the Camp Lejeune exposure prompt question, the system shall present the following warning message then redisplay the Camp Lejeune question.  “Enter YES if this problem is related in some way to the patient's exposure to  Camp Lejeune water contaminants.” |
| 2.6.18.7.4 | The help text (e.g., entering ‘??’) of the Camp Lejeune prompt question in VistA Problem List shall be as follows:  Enter YES if this problem is related in some way to the patient's exposure to  Camp Lejeune water contaminants. |
| 2.6.18.8 | When the Camp Lejeune exposure is added to or the prompt question value is changed for a problem within a patient’s problem list, the modified Camp Lejeune exposure response shall be displayed within the Veteran’s problem list history.    **Figure 104: Screen Capture of Problem List Change History Screen**  **NOTE:** The text of the history entry for Camp Lejeune shall be as follows:  For adding Camp Lejeune to a problem “CAMP LEJEUNE added by…” For updating Camp Lejeune to a problem “CAMP LEJEUNE changed by…” |

**2.7 Graphical User Interface (GUI) Specifications**

General Graphical User Interface (GUI) Compliance: A well-defined on-screen indication of the current focus shall be provided. The on-screen indication moves among interactive interface elements as the input focus changes. The focus shall be programmatically exposed so that assistive technology can track focus and focus changes. The identity, operation, and state of the user interface element shall be available to support assistive technology. When an image represents a program element, the information conveyed by the image must also be available in text. Textual information shall be provided through operating system functions for displaying text. The minimum information that will be available is text content, text input caret location,

and text attributes. Applications shall not override user-selected contrast and color selections and other individual display attributes. When electronic forms are used, the form shall allow people using assistive technology to access the information, field elements, and functionality required

for completion and submission of the form, including all directions and cues.

**2.8 Multi-divisional Specifications**

The VistA patches as well as other supporting applications (e.g., CPRS, CP, EC) versions that are being updated through CL-V Increment 4 will allow Camp Lejeune eligibility and Camp Lejeune related services to propagate across the multi-divisional VHA facilities supported by one VistA instance as well as to ancillary, administrative, and financial divisions that support the processing, tracking, and billing of Camp Lejeune related care.

**2.9 Performance Specifications**

VistA performance testing is not planned for CL-V Increment 4 as there is no currently established baseline; future performance testing may be conducted once a baseline has been established.

**2.10 Quality Attributes Specification**

Quality attribute specifications shall enhance the supportability, maintainability, portability, testability, and reusability of the CL-V Increment 4. This shall include the applicable coding standards, naming conventions, class libraries, maintenance access, and maintenance utilities. The quality attributes specifications are achieved by the accepted design of the Camp Lejeune enhancements.

**2.11 Reliability Specifications**

System availability should be 24 hours per day, 365 days per year, except during periods of scheduled maintenance.

**2.12 Scope Integration**

The scope of requirements to support the required Camp Lejeune business needs among the VA systems is listed within section 1.2 Scope of this RSD and is limited to the system requirements defined in the section 2.6 2.6 Functional Specifications of this document.

**2.13 Security Specifications**

VA requires that application enhancements address standards, procedures, and technical aspects of the solution required for achieving system certification and accreditation. These should address controls listed in Federal Information Processing Standards (FIPS) PUB 200, Minimum Security Requirements for Federal Information and Information Systems. Additional security specifications include:

 Compliance with standards and regulatory requirements published in VA Handbook and Directive 6500: Veterans Affairs Directives > VA Handbook and Directive 6500

 Compliance with FIPS PUB 140-2, Security Requirements for Cryptographic Modules, and for all voice and data traffic encryption: Computer Security Division > Publications > Federal Information Processing Standards > FIPS PUB 140-2.

 Additionally, due to patient safety considerations, data protection measures such as backup intervals and redundancy shall be consistent with systems categorized as critical.

**2.14 System Features**

The VistA and GUI interfaces of the VA applications included in the CL-V Increment 4 allow the user with appropriate permissions to view and edit a Veteran’s Camp Lejeune associated healthcare services, billing and reporting. Refer to section 2.6, Functional Specifications, for the details of all included functionality.

**2.15 Usability Specifications**

CL-V usability specifications are as follows.

**Table 16: Usability Requirements**

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| --- | --- |
| **ID** | **Usability-User Interface Requirements** |
| NONF1611 | User acceptance training and testing tools shall include user prompts to guide the use of the application so that minimal technical support is needed by the user. |
| NONF1612 | A technical training curriculum shall be developed and delivered to all levels of staff users. |
| NONF1613 | The training curriculum shall state the expected task completion time for primary and secondary users. |
| None | Content in table cells shall be left aligned to facilitate quick visual scan. |
| None | Text for column headers shall be left aligned to facilitate visual scan and make columns and content appear more organized. |
| None | Mixed case instead of all caps shall be used whenever possible (e.g., dropdown list items, table data, table headers, hyperlinks, tab names). The use of “all caps” shall be limited throughout the application. |
| None | Button labels shall be simplified. Buttons shall be re-labeled to reflect standard terminology that is common in Web interfaces and other applications (e.g., “Cancel”). The action being performed shall be emphasized in the most succinct |

|  |  |
| --- | --- |
| **ID** | **Usability-User Interface Requirements** |
|  | way possible. Redundancy shall be minimized in text/terminology that is used to  convey the same action. |
| None | Page/section titles shall be left aligned to anchor titles in consistent locations regardless of window sizing. |
| None | Field labels shall be left aligned to facilitate quick visual scan and make forms and field groupings appear more organized. |
| None | Use of acronyms shall be avoided unless (a) they are widely understood or well known, or (b) space to display the full meaning is very limited. This supports  naïve user understanding. If limited space results in using uncommon acronym, it shall be defined within Help or as a tooltip. |
| None | Colors such as red and green shall be used only for status-driven content. Use of red for text and content, links, button labels, etc. shall be avoided. This will reduce risk for user error, improve link discoverability, and facilitate understanding of differences in navigation, actions, and content. It will also help users to isolate important status information (using red, green, etc.) from other less important information when viewing and processing information provided to them on a  page. |
| None | Visual separation shall be provided between the navigation space and the main content area. |
| None | Field-level validation and notification of missing information shall be added on the same page without launching a new window or navigating to another page. |
| None | All text hyperlinks shall appear consistent in style. |
| None | Drop-down selection box widths shall be appropriate for content and visual appeal. |
| None | Standard and always visible radio buttons shall be used for Yes/No options instead of requiring the user to click in a drop-down box and then click to select the “Yes” or “No” option. |
| None | Standard date and time selection widgets shall be used. Where date and time are selected from a standard widget, direct data entry shall also be provided to support keyboard navigation. Field-level validation shall be enabled immediately upon entry. Instructional format text shall be included within the field entry box. |
| None | Standard sort behavior and visual indications on columns shall be provided in all tables. |
| None | A standard model for use and design of controls, buttons, hyperlinks, and navigation elements shall be designed and adhered to. |
| None | Abbreviations shall be avoided. |
| None | Text size shall be readable (for example, by using the 007 Rule to assure text size is readable for users with 20/40 vision. The formula: Text height = .007 \* distance between eyes and screen). |
| None | Common navigation elements shall be placed in consistent locations. |

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| **ID** | **Usability-User Interface Requirements** |
| None | Critical information shall be placed “above the fold” (i.e., in the top portion of the  screen that is immediately viewable). |
| None | Consistent screen flow models, elements, and terms shall be used to support similar workflows |
| None | Consistently named buttons shall be used when actions are the same (e.g., Add vs. Save vs. Submit). |
| None | Users shall be able to print views from where they are in the interface. Requiring the user to “run a report” in order to print something that is viewable on the screen shall be avoided. |
| None | Field entry tooltips shall be provided at the field location. Consistency shall be ensured across the application in field labels, formats, location of tooltips, and tooltip text. |
| None | Visual indication of required fields shall be provided. |
| None | Field labels shall be displayed in close proximity to entry elements. |
| None | Consistent elements shall be used to filter data. |
| None | Consistent elements shall be used to sort data. |
| None | A consistent model shall be used for display, layout, and grouping of data entry fields. |
| None | Alternate row shading shall be provided in lengthy tables of data, form elements, etc. |
| None | Icons shall be used that are recognized by users. |
| None | Some “white space” shall be provided between status icons in report views, white  board views, etc. |
| None | Default values in entry and selection fields shall be auto-populated when possible and appropriate. |
| None | Status icons shall be visually differentiated from clickable icons, when appropriate. |
| None | The appropriate user tab sequence through fields in forms shall be defined and supported in order to support keyboard navigation when entering data in forms. |
| None | Standard action button placement on screens, forms, etc. shall be defined and adhered to. |
| None | The primary action button on a page shall be visually distinguished. |
| None | Screen elements, action elements, workflow sequences within and across screens, language, etc. shall be consistently used. |
| None | Error messages shall be provided in user-centric language with specific instructions on the meaning of the error and how to recover from it. Error messages and method of display shall be used consistently across the interface. |

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| **ID** | **Usability-User Interface Requirements** |
| None | Context-specific Help shall be provided. |
| None | The term “sex” or any like abbreviations of that to represent gender shall not be  used. |

**3 Purchased Components**

The CL-V Increment 4 enhancements will use existing infrastructure. No current need exists for the purchase of additional components.

**4 Estimation**

Function Point Estimation was not used for the Camp Lejeune Increment 4.

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

**Estimate**

**Application**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item** | **A** | **B** | **C** | **D** | **E** | **Total** |
| **Counted Function**  **Points** |  |  |  |  |  |  |
| **Estimated Scope**  **Growth** |  |  |  |  |  |  |
| **Estimated Size at**  **Release** |  |  |  |  |  |  |

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| --- | --- | --- |
| **Size-Based Effort Estimates** | **Labor Hours** | **Probability** |
| **Low-Effort Estimate – With indicated probability, project will consume no more than:** |  |  |
| **High-Effort Estimate – With indicated probability, project will consume no more than:** |  |  |

|  |  |  |
| --- | --- | --- |
| **Size-Based Duration Estimates** | **Work Days** | **Probability** |
| **Low-Duration Estimate – With indicated probability, project will consume no more than:** |  |  |
| **High-Duration Estimate -- With indicated probability, project will consume no more than:** |  |  |

**5 Approval Signatures**

*, Veteran Centered Experience (VCE), Integrated Project Team (IPT) Chair or Designee*

*, CL-V OI&T Project Manager*

*, Acting HEC Director or Designee*

*, Veteran Centered Experience (VCE), Program Manager Enrollment Systems or Designee*

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**Appendix A: Non-Functional Requirements**

The following non-functional requirements should be reviewed and assessed while developing the requirements for the CL-V Increment 4.

**System Performance Reporting Requirements**

Refer to section 2.9 Performance Specifications.

**Operational Environment Requirements**

1. System response times and page load times shall be consistent with VistA standards.

2. The CL-V Increment 4 will conform to existing VistA Operational environment standards with regards to maintenance outage, response times from unscheduled system outages, and real-time monitoring of performance parameters.

**Documentation Requirements**

Refer to section 2.5 Documentation Specification of this document for CL-V Increment 4 documentation requirements.

**Implementation Requirements**

1. Technical Help Desk support for the CL-V Increment 4 enhancements shall be provided for users to obtain assistance within the current guidelines of the affected VistA applications.

2. The IT solution for CL-V Increment 4 shall be designed to comply with the applicable approved Enterprise Service Level Agreements.

3. Successful implementation of this project requires adequate training and education for end users and support staff. Refer to the CL-V Increment 4 Training Plan for details of the training content and delivery.

**Data Protection/Back-up/Archive Requirements**

1. CL-V Increment 4 does not require new back-up, data recovery or data archival processes for when the systems are brought off-line for maintenance or technical issues/problems.

2. Data protection measures, such as back-up intervals and redundancy shall be consistent with systems categorized as routine (30 day restoration), mission essential (72 hour restoration), or mission critical (12 hour restoration).

**Data Quality/Assurance Requirements**

Data quality and data assurance requirements are met by the accepted design of the CL-V

proposed solution and acceptance of the validation results of that design.

**User Access/Security Requirements**

The CL-V Increment 4 proposed solution shall meet all Veterans Health Administration (VHA) Security, Privacy, and Identity Management requirements including VA Handbook 6500.

**Usability/User Interface Requirements**

CL-V Increment 4 will adhere to good User Interface/User Centered Design (UI/UCD) principles as outlined in the Usability section of the BRD. Refer to section 1.3 Reference section of this document for the most recent CL-V Increment 4 BRD.

**Conceptual Integrity**

No new or enhanced standards based messaging or new middleware infrastructure is needed in the proposed solution for the CL-V Increment 4 with regards to supporting of both Legacy Veterans Health Information Systems Technology Architecture (VistA) and future VistA deployments.

**Availability**

The CL-V Increment 4 will adhere to current VistA availability standards and guidelines.

**Interoperability**

The CL-V Increment 4 shall support all recognized health system standards i.e., Health Level 7 (HL7), Fast Healthcare Interoperability Resources (FHIR).

**Manageability**

1. As Camp Lejeune – Veterans Increment 4 is an enhancement project, maintenance events and tracking does not apply to the project.

2. The Camp Lejeune – Veterans Increment 4 will adhere to the current audit capabilities for system access and usage with settings that are configurable to support internal and external audits based on federal and VHA mandates.

3. The Camp Lejeune –Veterans Increment 4 shall comply with VA Directive 6300 Records and Information Management and with VHA Records Control Schedule (RCS) 10-1, in general and specifically with Electronic Final Version of Health Record: Destroy/Delete

75 years after last episode of patient care, or longer (if specified).

**Performance**

The Camp Lejeune – Veterans Increment 4 shall comply with all current VistA performance standards and guidelines.

**Reliability**

The Camp Lejeune – Veterans Increment 4 shall comply with all current VistA reliability standards for each of the enhanced system.

**Security**

The Camp Lejeune – Veterans Increment 4 shall adhere to the current standard for providing of the management of electronic attestation of information including the retention of the signature of attestation (or certificate of authenticity) associated with incoming or outgoing information.

**Supportability**

The Camp Lejeune – Veterans Increment 4 is not introducing any new performance metrics, reporting, and data back-up requirements. The Camp Lejeune – Veterans Increment 4 will adhere to current in place enterprise supportability infrastructure.

**Usability**

1. The Camp Lejeune – Veterans Increment 4 shall provide viewability/usability of VistA

applications.

2. The Camp Lejeune – Veterans Increment 4 shall provide user prompts and screen help shall be embedded into the system to guide use of the solution.

**Documentation**

Refer to section 2.5 Documentation Specification of this document for CL-V Increment 4 documentation requirements.

**Appendix B: Acronym List and Glossary**

**Table A1: Glossary**

|  |  |
| --- | --- |
| **Term** | **Meaning** |
| Administrative Data  Repository (ADR) | The authoritative data store within VHA for crosscutting person administrative information. The ADR contains identification and crosscutting demographics data as well as other administrative information. May also include subset of Enrollment Database (EDB) data. May also be referred to as ADR-N or ADR-L to designate a national or local instance |
| Chief Business Office | The VHA Chief Business Office provides national leadership for advancing business practices that support patient care and delivery of health benefits. |
| Enrollment Services (ES) | A single, department-wide data system supporting registration and eligibility for the three administrations that will make this information more accessible and consistent. |
| Health Level 7 (HL7) | American National Standards Institute (ANSI) standard for electronic data exchange in healthcare environments. It is an interface specification designed to standardize the way in which healthcare information is transferred between systems. It provides the foundation for all communication between a facility/site and  the Health Eligibility Center. |
| Identity Management | VA group validating the identity of individuals attempting to use VA systems, and providing authentications to those various systems for the intended user’s permissions to those systems. |
| Interface Control  Document (ICD) | Describes the real time components that enable transactions between two separate systems. |
| Integration Control Number  (ICN) | A unique number assigned to each Veteran. This number is used to identify Veteran records across multiple VA systems. |
| Payload | Essential data that is being transmitted from Enrollment Services. |
| Preferred Facility | Preferred Facility for treatment, as indicated by the Veteran to whom it applies. |
| Primary View | Master Veteran Index’s (MVI) master view of the Identity Traits. |
| Sites of Record | The VAMCs that are identified in the patient record. |
| System Design Document  (SDD) | Describes the construction of a system. The SDD identifies the top-level system architecture, and identifies hardware, software, communication, and interface components. |
| Veteran | Any person who served honorably on active duty in the armed forces of the United States. |
| VistA | Veterans Health Information Systems and Technology Architecture, formerly known as Decentralized Hospital Computer Program (DHCP), encompassing the complete information environment at VA medical facilities. It consists of hardware, |

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| **Term** | **Meaning** |
|  | software packages, and comprehensive support for system-wide and station specific, clinical, and administrative automation needs. |

**Table A2: Acronyms and Abbreviations**

|  |  |
| --- | --- |
| **Acronym** | **Description** |
| A/O | Agent Orange |
| ACRP | Ambulatory Care Reporting Program |
| ADR | Administrative Data Repository |
| ADT | Admission Discharge Transfer |
| AITC | Austin Information Technology Center |
| ANR | Automated Notification Reporting |
| ANSI | American National Standards Institute |
| AO | Agent Orange |
| AoA | Analysis of Alternatives |
| API | Application Program Interface |
| BI | Billing Information |
| BPMO | Business Project Management Office |
| BRD | Business Requirements Document |
| CBO | Chief Business Office |
| CDC | Center for Disease Control and Prevention |
| CDCO | Corporate Data Center Operations |
| CFD | Corporate Franchise Data Center (Austin Campus) |
| CI | Configuration Items |
| CIDC | Compliance with Clinical Indicators Data Capture |
| CIS | Clinical Information Systems |
| CL | Camp Lejeune |
| CLE | Camp Lejeune Eligibility |
| CLEAR | Camp Lejeune Environmental Action Report |
| CL-V | Camp Lejeune-Veterans |
| CM | Configuration Management |
| COPAY | Copayment |
| COTR | Contracting Officer’s Technical Representative |
| CP | Clinical Procedures |
| CPM | Critical Path Method |
| CPRS | Computerized Patient Record System |
| CPT | Current Procedural Terminology |
| CR | Clinical Reminders |
| CRM | Customer Relationship Management |

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| **Acronym** | **Description** |
| CT | Claims Tracking |
| CV | Combat Veteran |
| DCBO | Deputy Chief Business Officer |
| DEA | Drug Enforcement Agency |
| DEE | Dual Eligibility Enhancements |
| DHCP | Decentralized Hospital Computer Program |
| DI | Data Integration |
| DISP | Disposition |
| DOB | Date of Birth |
| DoD | Department of Defense |
| DPRIS | Defense Personnel Records Information Systems |
| DSS | Decision Support System |
| E&E | Enrollment and Eligibility |
| EA | Enterprise Architecture |
| EC | Event Capture (VistA) or Environmental Contaminants |
| ECME | Electronic Claims Management Engine |
| EDB | Enrollment Database |
| EHBD | Enterprise Health Benefits Determination |
| EI | Environmental Indicator |
| EJB | Enterprise JavaBeans |
| ES | Enrollment System |
| ESI | E&E System Improvements |
| ESR | Enrollment System Redesign |
| EV | Event Reminders |
| FB | Fee Basis |
| FBCS | Fee Basis Claims System |
| FMS | Financial Management System |
| FN | First Name |
| FPPS | Payment Processing System |
| GMT | Geographic Means Test |
| GUI | Graphical User Interface |
| H.R. | House Resolution |
| HAC | Health Administration Center |
| Handbook | Veterans Benefit Handbook |
| HCPS | Healthcare Common Procedure Coding System |
| HEC | Health Eligibility Center |
| HHS | Department of Health and Human Services |
| HL7 | Health Level 7 |

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| **Acronym** | **Description** |
| HNC | Head and/or Neck Cancer |
| HPTi | High Performance Technologies, Inc. |
| HRC | Health Resource Center |
| HSD&D | VistA Health Systems Design and Development |
| HUI | Hawaii User Interface |
| IB | Integrated Billing |
| IBT | Integrated Billing Tracking |
| ICD | Interface Control Document |
| ICN | Integration Control Number (previously VPID) |
| IdM | Identity Management |
| iEHR | integrated Electronic Health Record |
| IMS | Integrated Master Schedule |
| IPR | In Progress Review |
| IPT | Integrated Project Team |
| IR | Ionizing Radiation |
| IRM | Information Resource Management |
| IRS | Internal Revenue Service |
| IT | Information Technology |
| IV | Income Verification |
| IVM | Income Verification Match |
| LN | Last Name |
| LTC | Long Term Care |
| MAS | Medical Administration Service |
| MCA | Managerial Cost Accounting |
| MS | Member Services |
| MSDS | Military Services Data Sharing |
| MSS | Member Support Services |
| MST | Military Sexual Trauma |
| MT | Means Test |
| MVI | Master Veteran Index |
| NCA | National Cemetery Administration |
| NCPDP | National Council for Prescription Drug Programs |
| NIST | National Institute of Standards and Technology |
| NPCDB | National Patient Care Database |
| NPRC | National Personnel Records Center |
| NSC | Non-Service Connection |
| O&M | Operations and Maintenance |
| OED | Office of Enterprise Development |

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| **Acronym** | **Description** |
| OMPF | Official Military Personnel Files |
| OPAI | Outpatient Pharmacy Automated Interface |
| OPP | Office of Policy and Planning |
| ORT | Operational Readiness Testing |
| P.L. | Public Law |
| PCE | Patient Care Encounter |
| PCO | Program Control Office |
| PD | Product Development |
| PEO | Program Executive Office |
| PG | Priority Group |
| PgM | Program Manager |
| PM | Project Manager |
| PMAS | Project Management Accountability System |
| PMP | Project Management Plan |
| PS | Product Support |
| PSO | Outpatient Pharmacy namespace in VistA |
| PTF | Patient Treatment File |
| QA | Quality Assurance |
| RAD | Radiology |
| REE | Registration Eligibility and Enrollment |
| REEG | Enrollment and Eligibility |
| RMP | Risk Management Plan |
| RNB | Reason Not Billable |
| RPC | Remote Procedure Call |
| RSD | Requirements Specification Document |
| SC | Service Connected |
| SDD | System Design Document |
| SDS | Standard Data Service |
| SHAD | Shipboard Hazard and Defense |
| SI | System and Information Integrity |
| SLA | Service Level Agreement |
| SMEs | Subject Matter Experts |
| SOP | Standard Operating Procedure |
| SP | Special Publication |
| SQA | Software Quality Assurance |
| SSA | Social Security Administration |
| SSN | Social Security Number |
| SWA | Southwest Asia |

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| **Acronym** | **Description** |
| SWAC | South West Asia Conditions |
| TAC | Technology Acquisition Center |
| TIU | Text Integration Utilities |
| TPB | Transitional Pharmacy Benefit |
| TSPR | Technical Services Project Repository |
| UI | User Interface |
| USMC | United States Marine Corps |
| VA | Veterans Administration |
| VBA | Veterans Benefits Administration |
| VE | View/Edit |
| VFA | Veterans Financial Assessment |
| VHA | Veterans Health Administration |
| VistA | Veterans Health Information Systems and Technology Architecture |
| VOA | Veteran’s On-Line Application |
| VPID | Veterans Affairs Personal Identifier |
| VRM | Veterans Relationship Management |
| WAN | Wide Area Network |
| WBS | Work Breakdown Structure |
| WIPT | Working Integrated Project Team |
| WSDL | Web Services Description Language |
| WSS | Web Self Service |
| XML | Extensible Markup Language |

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