**Beneficiary Travel Self-Service System (BTSSS)**

**User Guide**

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**Department of Veterans Affairs**

**Office of Information and Technology (OI&T)**

# Revision History

NOTE: The revision history cycle begins once changes or enhancements are requested after the document has been baselined.

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# Artifact Rationale

Per the Veteran-focused Integrated Process (VIP) Guide, the User’s Guide is required to be completed prior to Critical Decision Point #2 (CD2), with the expectation that it will be updated as needed. A User Guide is a technical communication document intended to give assistance to people using a particular system, such as VistA end users. It is usually written by a technical writer, although it can also be written by programmers, product or project managers, or other technical staff. Most user guides contain both a written guide and the associated images. In the case of computer applications, it is usual to include screenshots of the human-machine interfaces, and hardware manuals often include clear, simplified diagrams. The language used is matched to the intended audience, with jargon kept to a minimum or explained thoroughly. The User Guide is a mandatory, build-level document, and should be updated to reflect the contents of the most recently deployed build. The sections documented herein are required if applicable to your product.

## Note to Assistive Technology Users

Assistive Technology users who need to view this document in alternate format such as braille, large print, electronic format (CD) or with captions transcript, etc. should contact should contact the VA 504 Reasonable Accommodation office at 1-844-MYVA311.

**Table of Contents**

[Revision History ii](#_Toc493495251)

[Artifact Rationale iii](#_Toc493495252)

[Note to Assistive Technology Users iii](#_Toc493495253)

[1. Introduction 1](#_Toc493495254)

[1.1. Purpose 1](#_Toc493495255)

[1.2. Document Orientation 1](#_Toc493495256)

[1.2.1. Organization of the Manual 1](#_Toc493495257)

[1.2.2. Assumptions 2](#_Toc493495258)

[1.2.3. Coordination 2](#_Toc493495259)

[1.2.4. Disclaimers 3](#_Toc493495260)

[1.2.4.1. Software Disclaimer 3](#_Toc493495261)

[1.2.4.2. Documentation Disclaimer 3](#_Toc493495262)

[1.2.5. Documentation Conventions 3](#_Toc493495263)

[1.2.6. References and Resources 3](#_Toc493495264)

[1.3. National Service Desk and Organizational Contacts 3](#_Toc493495265)

[2. System Summary 4](#_Toc493495266)

[2.1. System Configuration 5](#_Toc493495267)

[2.2. Data Flows 5](#_Toc493495268)

[2.3. User Access Levels 10](#_Toc493495269)

[2.4. Continuity of Operation 11](#_Toc493495270)

[3. Getting Started 11](#_Toc493495271)

[3.1. Veterans Portal (Beneficiary) 11](#_Toc493495272)

[3.1.1. Logging On 11](#_Toc493495273)

[3.1.2. System Menu 11](#_Toc493495274)

[3.1.3. Changing User ID and Password 14](#_Toc493495275)

[3.1.4. Exit System 14](#_Toc493495276)

[3.1.5. Caveats and Exceptions 15](#_Toc493495277)

[3.2. CRM (Administrative) 15](#_Toc493495278)

[3.2.1. Logging On 15](#_Toc493495279)

[3.2.2. System Menu 15](#_Toc493495280)

[3.2.3. Changing User ID and Password 17](#_Toc493495281)

[3.2.4. Exit System 17](#_Toc493495282)

[3.2.5. Caveats and Exceptions 17](#_Toc493495283)

[4. Using the Software 18](#_Toc493495284)

[4.1. Veterans Portal (Beneficiary) 18](#_Toc493495285)

[4.1.1. Updating the Profile 18](#_Toc493495286)

[4.1.2. The Veterans Portal 21](#_Toc493495287)

[4.2. CRM (Administrative) 34](#_Toc493495288)

[4.2.1. Travel Clerk 34](#_Toc493495289)

[4.2.2. Business User 45](#_Toc493495290)

[4.2.3. Application Super User 45](#_Toc493495291)

[4.2.4. System Administrator 47](#_Toc493495292)

[5. Troubleshooting 51](#_Toc493495293)

[5.1. Special Instructions for Error Correction 51](#_Toc493495294)

[6. Acronyms and Abbreviations 52](#_Toc493495295)

[7. Appendix 53](#_Toc493495296)

[8. Index 54](#_Toc493495297)

**List of Tables**

[Table 1: Organization of the Manual 2](#_Toc493495298)

[Table 2: User Roles and Capabilities 10](#_Toc493495299)

[Table 3: Acronyms and Abbreviations 52](#_Toc493495300)

**List of Figures**

[Figure 1: System Configuration 5](#_Toc493495301)

[Figure 2: BTSSS State Machine Mapping 6](#_Toc493495302)

[Figure 3: Rules Engine (referenced in figure above) 7](#_Toc493495303)

[Figure 4: BTSSS Welcome Screen 12](#_Toc493495304)

[Figure 5: Profile Review Page 13](#_Toc493495305)

[Figure 6: My Dashboard 14](#_Toc493495306)

[Figure 7: My Dashboard User Menu 14](#_Toc493495307)

[Figure 8: Travel Clerk Dashboard 15](#_Toc493495308)

[Figure 9: Application Super User Dashboard 16](#_Toc493495309)

[Figure 10: Business User Dashboard 16](#_Toc493495310)

[Figure 11: System Administrator Dashboard 17](#_Toc493495311)

[Figure 12: Update Profile 19](#_Toc493495312)

[Figure 13: Accurate Profile Information 20](#_Toc493495313)

[Figure 14: Profile page buttons for Caregivers who are not Veterans 21](#_Toc493495314)

[Figure 15: Veteran selection for Caregivers 21](#_Toc493495315)

[Figure 16: Profile page buttons for Caregivers who are also Veterans 22](#_Toc493495316)

[Figure 17: The BTSSS Veterans Portal – My Dashboard 23](#_Toc493495317)

[Figure 18: Claim Details 24](#_Toc493495318)

[Figure 19: Appointment Details 26](#_Toc493495319)

[Figure 20: Directions to Facility 27](#_Toc493495320)

[Figure 21: Initiate a Claim 28](#_Toc493495321)

[Figure 22: Choose an Appointment 28](#_Toc493495322)

[Figure 23: Add an Appointment 29](#_Toc493495323)

[Figure 24: Choose an Expense Type 29](#_Toc493495324)

[Figure 25: Mileage Expense 31](#_Toc493495325)

[Figure 26: Address Verification Results pop up on a Mileage Expense form. 32](#_Toc493495326)

[Figure 27: Expense Line Items and Saving or Submitting a Claim 33](#_Toc493495327)

[Figure 28: New Claim 33](#_Toc493495328)

[Figure 29: Updated Appointment 33](#_Toc493495329)

[Figure 30: Denied claim in My Claims 34](#_Toc493495330)

[Figure 31: Denied Claim Rejection Reason(s) 34](#_Toc493495331)

[Figure 32: Facility Data 35](#_Toc493495332)

[Figure 33: Last Month’s Appointments 36](#_Toc493495333)

[Figure 34: Appointment Details 36](#_Toc493495334)

[Figure 35: New Claim Form 37](#_Toc493495335)

[Figure 36: Add Expense 37](#_Toc493495336)

[Figure 37: New Mileage Expense 38](#_Toc493495337)

[Figure 38: Active Claims 38](#_Toc493495338)

[Figure 39 Calculate Total Cost Requested 39](#_Toc493495339)

[Figure 40: Attach a file or Add a Note to a Claim 39](#_Toc493495340)

[Figure 41: Attach a file or Add a Note to a Contact 40](#_Toc493495341)

[Figure 42: Manual Processing Time to complete a manual claim review 40](#_Toc493495342)

[Figure 43: Manually Review By date and Hours Remaining to complete a manual claim review 40](#_Toc493495343)

[Figure 44: Rules Engine Messages section of the Claim page 41](#_Toc493495344)

[Figure 45: Rule Code details related to Rules Engine Messaging 41](#_Toc493495345)

[Figure 46: Notes section of a Claim containing rejection letter and appeals process note 41](#_Toc493495346)

[Figure 47: Deductible waiver results in the Rules Engine output for a processed claim 42](#_Toc493495347)

[Figure 48: Deductible Waiver sub-grid on a Contact page 42](#_Toc493495348)

[Figure 49: New Deductible Waiver form to manually add a waiver for a contact 42](#_Toc493495349)

[Figure 50: Profile Update Requests (My Tasks) 43](#_Toc493495350)

[Figure 51: Profile Update Request Record 43](#_Toc493495351)

[Figure 52: Setting a Contact as a Caregiver 44](#_Toc493495352)

[Figure 53: Assigning a Veteran to a Caregiver 44](#_Toc493495353)

[Figure 54: Active Facilities 45](#_Toc493495354)

[Figure 55: New Facility 46](#_Toc493495355)

[Figure 56: Facilities 47](#_Toc493495356)

[Figure 57: Update Facility Team 47](#_Toc493495357)

[Figure 58: Delete a Facility 48](#_Toc493495358)

[Figure 59: RulesConfigs 48](#_Toc493495359)

[Figure 60: Active RulesConfigs List 48](#_Toc493495360)

[Figure 61: New RulesConfig 49](#_Toc493495361)

[Figure 62: FacilityRulesConfigs 49](#_Toc493495362)

[Figure 63: Active FacilityRulesConfigs 50](#_Toc493495363)

[Figure 64: New FacilityRulesConfig 50](#_Toc493495364)

[Figure 65: Facilities 51](#_Toc493495365)

[Figure 66: Update Facility Team 51](#_Toc493495366)

# Introduction

The Department of Veterans Affairs (VA) operates the nation’s largest integrated health care network, operating over 150 hospitals, over 130 community living centers, and over 900 outpatient clinics. There are over 8.5 million Veterans enrolled in the VA health care system, with over 5.5 million Veterans using the Veterans Health Administration (VHA) health care system in any given year. In addition to the health care facilities available for the Veteran, the VA has authority to provide, to eligible persons, reimbursement for mileage driven in a private vehicle and transportation by common carrier/public transportation (plane, bus, taxi, etc.). In addition, when medically justified by a VA health care provider, special mode of transportation (ambulance, wheelchair van, etc.) may be approved for Beneficiary Travel (BT)-eligible Veterans. The eligible Beneficiary requests travel reimbursement through the BT program.

In 1978, the VA travel mileage reimbursement rate was 11 cents per mile; the rate was increased to 28.5 cents per mile in February 2008; and increased again, in November 2008, to 41.5 cents per mile. As a result, BT experienced significant growth in both use and cost. BT is now one of the most highly funded federal transportation programs for people with special needs. In December 2009, the VHA reported that, following the mileage rate reimbursement increase in November 2008, mileage claims grew by 76 percent, with a 30 percent increase in the number of Veterans claiming travel reimbursements.

The VHA estimates that if all Veterans eligible for mileage reimbursement sought it, the VA would incur expenses in excess of $1.5 billion per year. BT obligations were approximately $861 million in Fiscal Year (FY) 2012; starting in 2010, the VHA began a series of initiatives to improve oversight of the BT and travel reimbursement claims processing. The Beneficiary Travel Self-Service System (BTSSS) is a portion of the BT overall improvement effort.

The VA seeks to advance the BT program by creation of a web-based beneficiary self-service application that will automate claims submission and travel reimbursement payment. The current travel reimbursement process is manual, time consuming, and requires the assistance of a VA clerk. The BTSSS will continue the efforts of the VA to improve its services to Veterans, and reduce long-term costs, by streamlining the travel claim and reimbursement process.

The BTSSS will provide features and capabilities that leverage automation and multiple user-interface capabilities to manage and process BT claims, common in commercial software. The VA plans to acquire a Commercial Off-the-Shelf (COTS) software product that can be customized to integrate with the VA’s Veteran identification systems for records and the appointment scheduling systems.

## Purpose

The purpose of this document is to familiarize users with the important features and navigational elements of the new BTSSS tool.

## Document Orientation

### Organization of the Manual

This user guide was written for Veterans who utilize the current VistA (Veterans Health Information Systems and Technology Architecture) application for reimbursement of travel expenses for visits to VA facilities, as well as travel clerks and other administrators of the travel expense and reimbursement process.

Table : Organization of the Manual

| Document Section | Description |
| --- | --- |
| Introduction | This section contains introductory content regarding the BTSSS project and this document, including BTSSS background information, how the user guide is organized, and user assumptions. |
| System Summary | This section includes technical and functional details about BTSSS, including descriptions of features, and system diagram, and the flow of the data. |
| Getting Started | This section details how to access BTSSS, navigate within the system, and exiting the system. |
| Using the Software | This section instructs the user how to use BTSSS. There will be subsections for the different roles accessing BTSSS. |
| Troubleshooting | This section contains details around any issues or confusion that may arise while using the system and what to do to address each issue. |
| Acronyms and Abbreviations | This section is a list of the acronyms and abbreviations used in this guide and the meaning of each. |
| Appendix | N/A |
| Index | N/A |

### Assumptions

This guide was written with the following assumed experience/skills of the audience:

* User has basic knowledge of the Windows operating system (such as the use of commands, menu options, and navigation tools).
* User has been provided the appropriate active roles, menus, and security keys required to use BTSSS.
* User is using BTSSS for activities related to processing expense reimbursement claims.
* User has validated access to BTSSS as the appropriate role.
* Travel Clerk, Super Application User, Business User, and System Administrators users have basic knowledge of the Microsoft Customer Relationship Management (CRM) application (such as the use of commands, menu options, and navigation tools) and have been trained on using BTSSS.

### Coordination

The following organizations within the VA may require coordination with the implementation and use of the system by its targeted user base.

* The Travel Clerks responsible for processing claims.
* All VA facilities with kiosks and Travel Clerks providing the ability to process claims.
* The VA Office of Information and Technology (OI&T) Help Desk responsible for supporting BTSSS.
* All services providing data to BTSSS, including
  + Enrollment System
  + Financial Management System/Financial Services Center
  + Identity Access Management
  + Master Veterans Index
  + Corporate Data Warehouse
  + VistA Integration Adapter

### Disclaimers

#### Software Disclaimer

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#### Documentation Disclaimer

The appearance of external hyperlink references in this manual does not constitute endorsement by the VA of this Web site or the information, products, or services contained therein. The VA does not exercise any editorial control over the information you may find at these locations. Such links are provided and are consistent with the stated purpose of the VA.

### Documentation Conventions

Navigation through the system will be depicted as screenshots using figures.

### References and Resources

No references or resources currently required.

## National Service Desk and Organizational Contacts

Users should continue to reference existing points of contact for information and troubleshooting purposes in place for VistA and the expense reimbursement process.

# System Summary

The new travel reimbursement solution, the BTSSS, will interface with existing VA systems that provide Veteran information, identity and access control, and Electronic Funds Transfer (EFT) information. The Veteran, or a non-Veteran claimant, will be able to submit their own claims, receive claim status, and file an appeal. The VHA will be able to generate liability, expenditure, and other BT reports to provide the oversight mandated by Office of Inspector General (OIG). The BTSSS needs to be web-based and accessible through the following means:

* Using standard web-browsers.
* Being integrated with VA self-service portals, such as AccessVA.
* Using Veteran Point of Service (VPS) Kiosks located in VA medical facilities.

The BTSSS will need to provide many of the features and capabilities found in the typical third-party expense management services and solutions. These can be summarized as:

* The ability to create a user profile with contact and financial information, which is used for EFT payment.
* The ability to create expense entries.
* The ability to plan for future BT. The ability to submit expenses for either manual or automatic review for approval.
* The ability to receive the payment in the form of an EFT transaction.
* The ability to improve Business Intelligence and Reporting.

The main difference between the BTSSS and the typical third-party expense management services and solutions is the need to evaluate claims based on the VA BT rules and guidelines, and using Medical Appointment and Eligibility information found in external VA systems. The BTSSS Requirements Specification Document (RSD) specifies the functional and non-functional requirements of the BTSSS. The BTSSS solution replaces the existing BT program functions performed by the current process and systems, while adding the following key features and capabilities:

* Support for EFT Payment: A central Business Need (BN) is to eliminate BT cash reimbursement payments and to alleviate the lines at the facilities. The BTSSS will be a key to moving to this new cashless model.
* Support for Veteran and Non-Veteran BT Claimants: The BTSSS will support the creation of BT profiles for both Veterans and non-Veteran BT Claimants to ensure efficient processing and payment.
* Support for Multiple User Interfaces and Modes: The BTSSS will be accessible via the following user interfaces:
  + A standard desktop web browser (for example, PC Desktop, laptop, etc.). This is to ensure quick deployment of the solution and immediate use.
* Note: Claimants will continue to be able to use kiosks to submit claims; however, technical integration between kiosks and BTSSS will come during a later phase. Ability to Plan for Future BT: The BTSSS will need to provide the BT claimant the ability to plan for future trips. This would entail allowing the BT claimant to submit information for a particular future appointment and receive information from the BTSSS about how the claim may be adjudicated (for example, the eligibility of the trip for BT reimbursement and, if eligible, the estimated reimbursement amount).

## System Configuration

The figure below shows the possible users and systems that the BTSSS will interact with to process claims.

Figure : System Configuration

This diagram illustrates the users and the external systems that interact with the BTSSS system.  The user types include System Administrators, Business Users, Travel Clerks, Beneficiary Travel Claimants and Application Super Users.  The external systems include Kiosks, the Financial Management System (FMS), Non-VA Appointment System, Enrollment System (ES), VistA, through the VistA Integration Adapter (VIA), the Master Veteran Index (MVI) and the Corporate Data Warehouse (CDW).

## Data Flows

The figure below shows all the possible states and processes through which a claim can flow to reach an end state of Claim Paid or Closed with No Payment.

Figure : BTSSS State Machine Mapping



Figure : Rules Engine (referenced in figure above)



Listed below are all the possible states of a claim from *Claim Initiation* to *Claim Paid* or *Closed with No Payment*.

States (numbers correspond with numbered states in BTSSS State Machine Mapping figure, above):

1. Claim Initiation – Beneficiary Claimant, Caregiver, or Travel Clerk starts a travel claim associated with either a future appointment or a completed appointment.
2. In Process – the claim has been saved and eSigned by the Beneficiary Claimant, Caregiver, or Travel Clerk and processing of the claim is started.
3. Pending – the claim is a mileage only claim and meets the mileage limitations.
4. Manual Review – the claim cannot be processed programmatically because it includes receipts; the mileage is not equal to or less than the calculated limit; the eligibility requirements are not met. This area of the BTSSS process needs expanding to include all of the decision making made during the review processing to better understand the steps involved.
5. Appeal – claimant must decide whether to appeal the denial of the claim and reapply or allow the claim to be archived.
6. Denied – a problem has been determined that has resulted in the claim being denied. The claimant is informed of this decision and provided with information on how to appeal the decision.
7. On Hold – more information is needed to process this claim. The claimant is informed of the status and provided with information about what is needed and the process for getting that information.
8. Submitted for Payment – the claim has been authorized and can now be sent to the Treasury Department.
9. Closed with no payment – no payment will be made on this claim and it will be archived.
10. Claim Paid – the fund transfer has been completed and the claim has been closed.

Processing (letters correspond with lettered steps in the BTSSS State Machine Mapping and Rules Engine figures, above):

1. Enter claim for either future or past appointment

Either a Beneficiary Claimant, a Caregiver, or a Travel Clerk will fill out the information required for a claim. This information can be added all at one time or during multiple sessions. It is possible to enter information for a claim associated with an appointment that has already been kept or for one in the future. The claim can be simply for mileage reimbursement or can also include reimbursement requests for hotel and other expenses associated with the appointment.

1. Changes made to claim or data source by claimant or by Travel Clerk

Since claims are not necessarily completed during a single session this step takes into account the ability to modify a claim that has been started but not submitted, a claim that was put On Hold and requires more information, and a claim that was denied and went thru an appeal process. Changes to the claim can be made by the Beneficiary Claimant, a Caregiver, or a Travel Clerk.

1. Claim expired?

At this point the date of the appointment associated with the claim is checked to ensure that it is still within the 30-day time limit. If it is more than 30 days after the appointment date, then the claim is marked as expired and archived.

1. While in this state, submission expiration is checked and reminders sent weekly once appointment is kept

When a claim has been started but not submitted it goes thru a couple of checks on a daily basis. Once the appointment associated with the claim has taken place then a check is made on whether the claim is past the 30-day limit. Additionally, on a weekly basis a reminder is sent to complete the claim once the appointment has been kept.

1. Ready to Save?

Once claim information is entered a choice needs to be made as to whether the claim is complete and ready to be submitted.

1. Add eSignature

At this point the claimant must provide an eSignature attesting to all of the information on the claim being correct.

1. Error Checking – required content and eligibility tests

Error checking is done at this point to make sure all required information has been collected (profile, address, banking information); that eligibility requirements have been met; and that the eSignature has been collected for the claim.

1. Errors?

The next step in the process is determined by the results of the error checking. If the claim has no errors, then the processing of the claim can continue. Otherwise processing goes back to the claimant.

1. Claim for future appointment?

A check is made to determine whether the appointment associated with the claim is marked as completed.

1. Claim is checked daily for completed appointment

Every day a workflow is run that checks for claims that have been submitted prior to the appointment to see if the appointments have been kept.

1. Appointment completed?

If the appointment has been completed, then the claim continues on to the In Process status. If not, then it returns to the pool of claims to be checked daily for a completed appointment.

1. Check claim to see if mileage only claim and if mileage reported is equal to or less than acceptable value

This step identifies ‘mileage only’ claims and compares the mileage reported with the calculated mileage between the physical address and the address of the facility associated with the appointment.

1. Meets criteria?

If the claim is a mileage only claim and meets the mileage limitations, then the claim automatically moves to the Pending state. Otherwise the claim will need to be forwarded to the VA. This step is where criteria are automatically checked to allow for automating the payment process. Mileage only claims are the obvious case but if criteria for processing any claim that includes receipts can be determined, this is where those tests are made.

1. Claimant obtains required information

Subsequent to having a claim put On Hold the claimant gathers the information requested and is ready to update the claim with this requested information.

1. Appeal granted?

If an appeal is granted, then processing returns to updating the claim and resubmitting it. Otherwise, the claim will be archived and marked as closed.

1. Tokenized claimant’s EFT information sent to Financial Management System (FMS)

Once a claim has been reviewed by a travel clerk and all is found to be in order it is forwarded to FMS with tokenized EFT information.

1. Claimant drops claim?

After being alerted to a claim being placed On Hold and being made aware of the required information, the claimant may decide to not proceed any further with the claim. If they do not pursue the claim any further, then the claim will be archived and marked as closed. Otherwise the claim will need to be updated.

1. Appeal is processed

The appeal is processed and a determination is made as to whether to grant the claim or not.

1. Claim reviewed – could be by multiple levels within VA

The VA goes thru whatever process they have for reviewing questionable claims. This area should be expanded to include the VA process and the tests they include for possible determination of rules to automate more of the process. May want to add additional States which reflect the manual handling of a claim and the steps a claim goes thru when being processed.

1. Appealed?

When a claim has been denied and the claimant informed of the reasons for the denial, they have the option of appealing. If they decide to appeal, then the claim goes to the Appeal process. Otherwise it is archived and marked as closed.

1. Decision?

As a result of the Manual Review process, a determination is made to deny, approve, or place the claim on hold. If denied, the claim continues to the Denied state.

1. BTSSS communicates with claimant – provides reason for denial and gives instructions for appeal

When a claim is denied the claimant is informed and the reason for the denial is passed on. They are also given instructions on how to appeal if they wish to do so.

1. BTSSS communicates with claimant – provides reason for On Hold and requests updates be made

When a claim is placed on hold, the claimant is informed of the reason for this status and the updates required to proceed.

1. Archive claim

All claims processed are saved. If they are not paid, then they are archived in case of any future need to access them. The claim is then closed.

1. Sent to Treasury

The final step of the payment process is for the claim to be sent to the Treasury Department for payment. The claim will then be marked as paid.

## User Access Levels

The table below describes the user roles and capabilities.

Table : User Roles and Capabilities

| User Role | Description | Capabilities |
| --- | --- | --- |
| BT Claimants | Represents a Veteran, Caregiver, or other party that is requesting BT reimbursement. | * Enter/View/Edit profile; * Enter/View/Edit claims (reimbursement requests) |
| Travel Clerk | Represents the person(s) responsible for assisting the BT Claimant with issues with their claim. May need to process the claim manually in some cases when exceptions or special situations are encountered. | * Enter/View/Edit profile; * Enter/View/Edit claims (reimbursement requests); * Approve requests; * Trigger/Send notifications. |
| Application Super User | Represents the person who is engaged in report design/customization, workflow design/modification, and parameters configuration setup/modification. | * Design/Edit Reports; * Design/Edit Workflow; * Enter/Edit Configurable parameters |
| Business User | Represents the person who utilizes the BTSSS data for business intelligence and reporting analysis. | * Run/View reports |
| System Administrator | Represents the person who has full control on the system. | * Full control. |

## Continuity of Operation

A disaster is defined as an incident which results in the loss of computer processing at one of the data centers in Microsoft Azure, to the extent that relocation to a Standby Facility must be considered. A disaster can result from a number of accidental, malicious or environmental events such as fire, flood, terrorist attack, human error, and software or hardware failures.

Specific goals of the plan are:

* To be operational within 1 day of a standby invocation
* To reinstate the development and testing environments within the maximum working standby period
* To minimize the disruption to the development and Quality Assurance (QA) resources

The Disaster Management Team is responsible for providing overall direction of the data center recovery operations. It ascertains the extent of the damage, activates the recovery organization, and notifies the team leaders. Its prime role is to monitor and direct the recovery effort. It has a dual structure in that its members include Team Leaders of other teams.

# Getting Started

## Veterans Portal (Beneficiary)

The following users will access the portal:

* Beneficiary (or Caregiver)

### Logging On

To access the BTSSS portal:

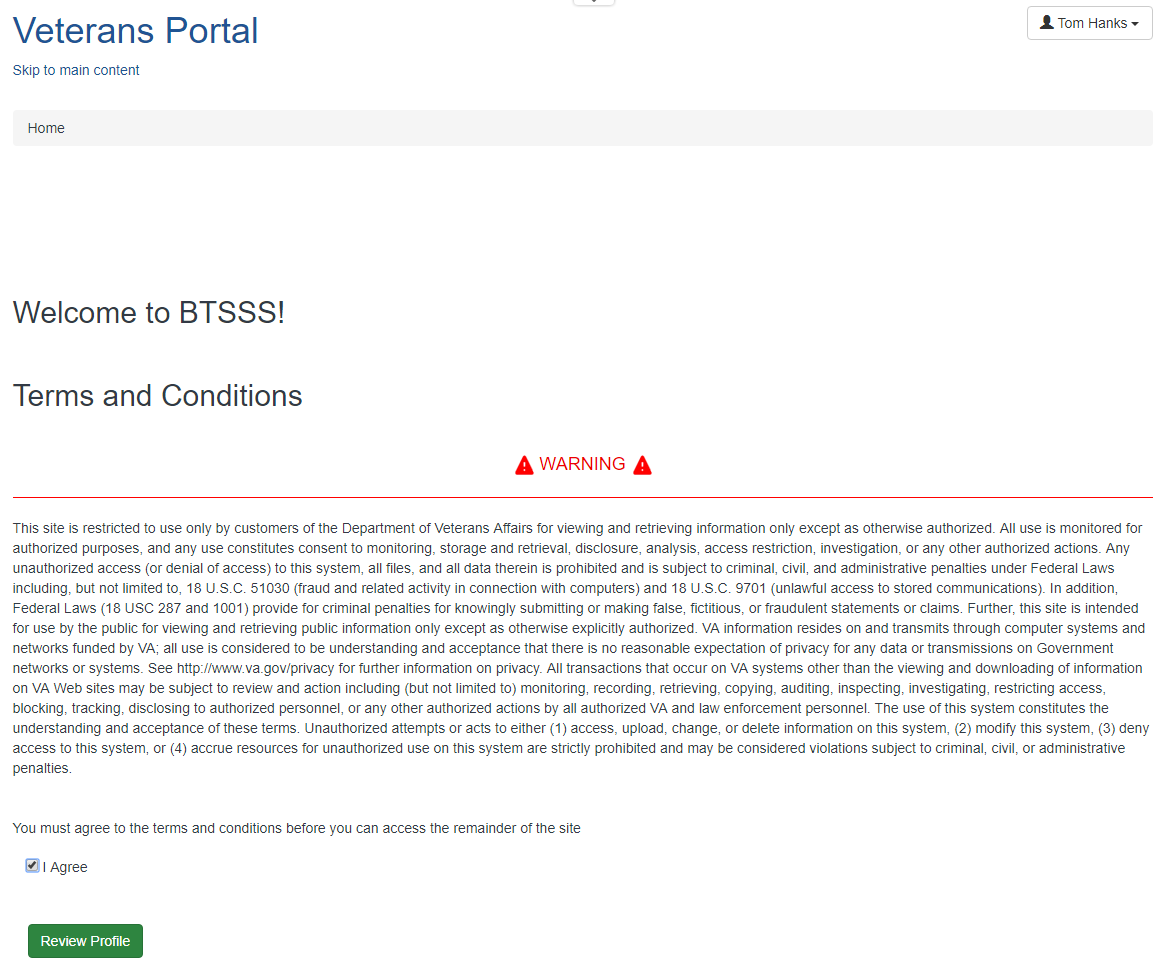
1. Go to the [BTSSS Portal](https://na01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fportal.libertybtdev.com%2F&data=01%7C01%7Cmaring%40i4dm.com%7Cc31926ea94054e0d1dec08d47849e659%7C208b8babd8b242cab1edcd80e49989d6%7C0&sdata=cU2sCb8wfJWf166Uq%2BT3VZWLICyg9sRVruSIQn7cIFE%3D&reserved=0)  [https://portal.libertybtdev.com/](https://na01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fportal.libertybtdev.com%2F&data=01%7C01%7Cmaring%40i4dm.com%7Cc31926ea94054e0d1dec08d47849e659%7C208b8babd8b242cab1edcd80e49989d6%7C0&sdata=cU2sCb8wfJWf166Uq%2BT3VZWLICyg9sRVruSIQn7cIFE%3D&reserved=0)
2. Click the Sign In button in the upper right corner. Note that in the future, users will be able to sign in using AccessVA.
3. Login using appropriate credentials.

### System Menu

Prior to accessing the menu, the user must:

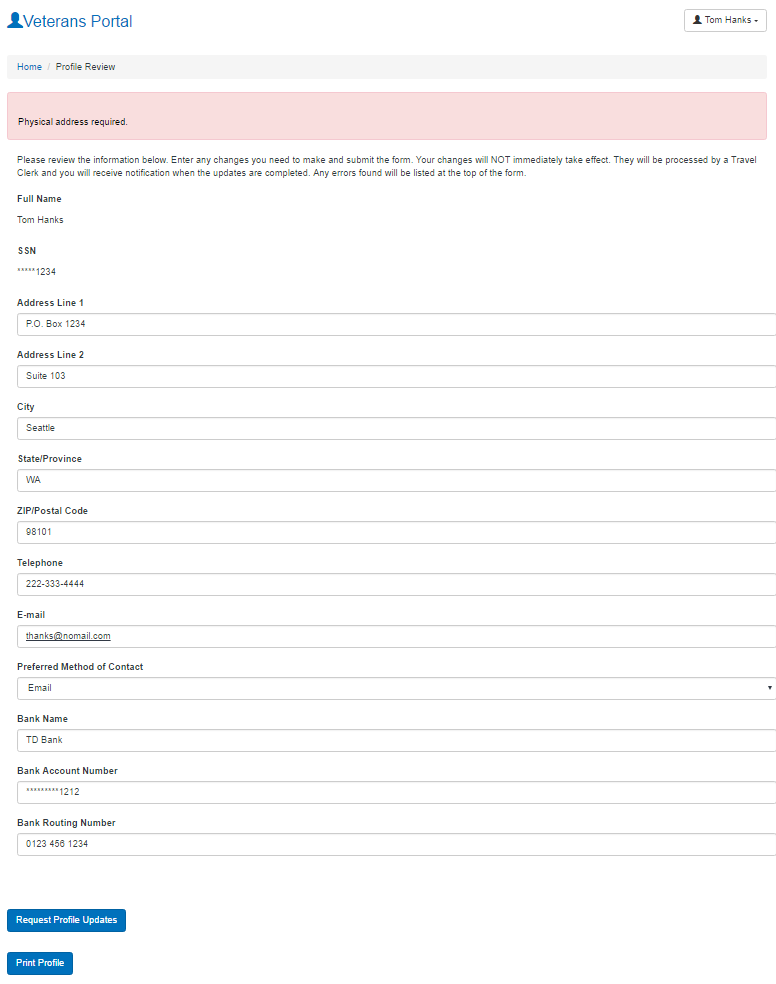
1. Check the **I Agree** checkbox to accept the Terms and Conditions and click **Review Profile**.

Figure : BTSSS Welcome Screen



1. Confirm profile information (name, address, etc.).

Figure : Profile Review Page



The following **My Dashboard** page and **User Menu** are then displayed:

Figure : My Dashboard

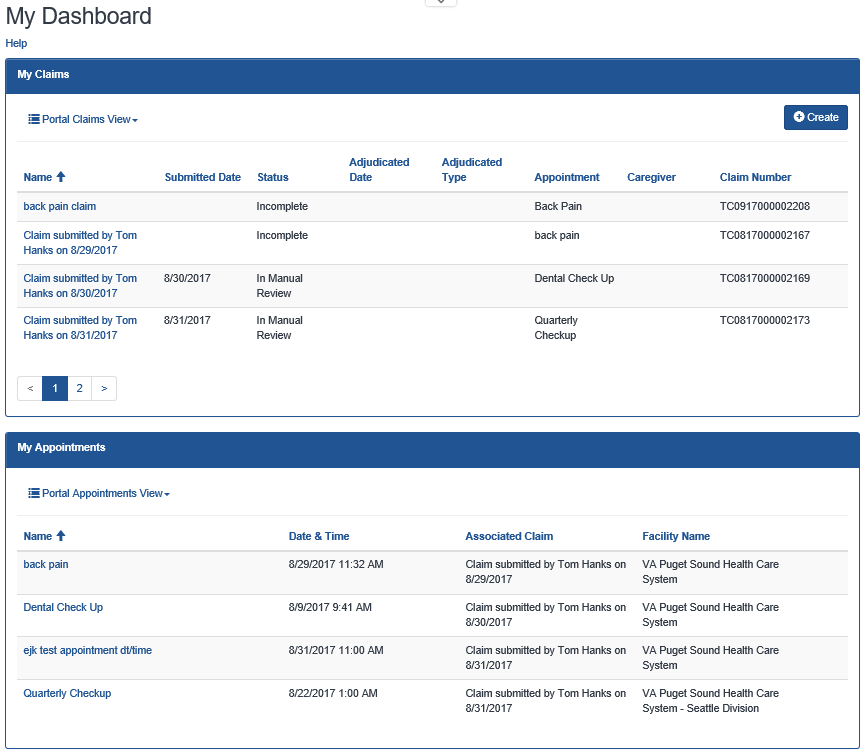
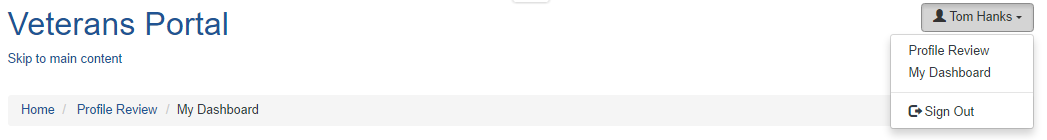


Figure : My Dashboard User Menu



### Changing User ID and Password

Users can change their username and password through the approved sign in system.

### Exit System

To exit the system, the user will click Sign Out.

### Caveats and Exceptions

All data must be accurate in the user’s profile. If any data need to be updated, a request can be made via BTSSS. The data will then be manually updated by a VA Travel Clerk. Alternatively, the user can update profile information via the appropriate source system.

## CRM (Administrative)

The following users will have access to CRM:

* Travel Clerk
* Application Super User
* Business User
* System Administrator

### Logging On

To access the BTSSS CRM:

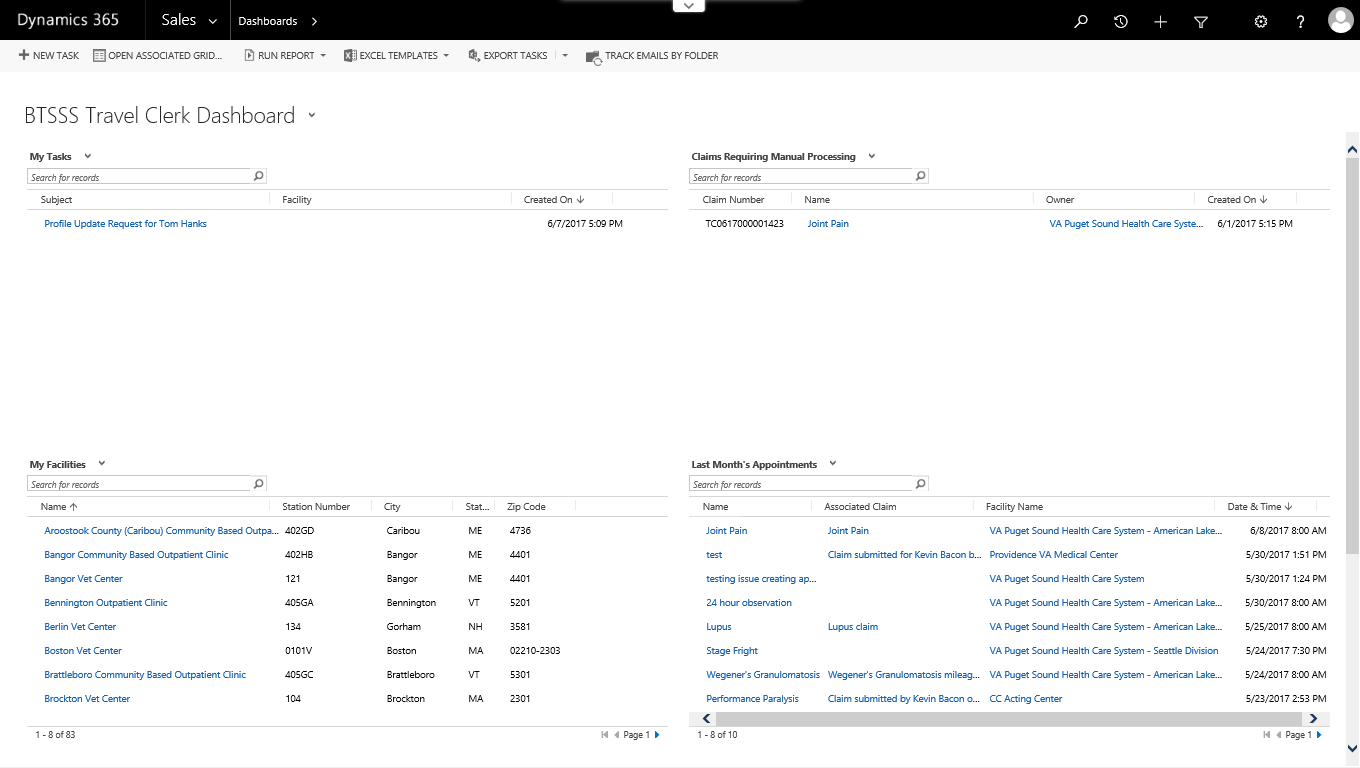
1. Go to [BTSSS CRM Portal](https://na01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fcrm.libertybtdev.com%2FVA&data=01%7C01%7Cmaring%40i4dm.com%7Cc31926ea94054e0d1dec08d47849e659%7C208b8babd8b242cab1edcd80e49989d6%7C0&sdata=jFLIjpKxG8EKnI31kjdjCaBpVnyTlSwN%2B0OGfkTz4AQ%3D&reserved=0)  [https://crm.libertybtdev.com/VA](https://na01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fcrm.libertybtdev.com%2FVA&data=01%7C01%7Cmaring%40i4dm.com%7Cc31926ea94054e0d1dec08d47849e659%7C208b8babd8b242cab1edcd80e49989d6%7C0&sdata=jFLIjpKxG8EKnI31kjdjCaBpVnyTlSwN%2B0OGfkTz4AQ%3D&reserved=0)
2. Login using appropriate credentials

### System Menu

Upon logging in, the user will see their dashboard. Each user role will have a specific dashboard layout. This dashboard layout is a default view but can be modified by the user. The dashboard will be the primary method for navigating BTSSS.

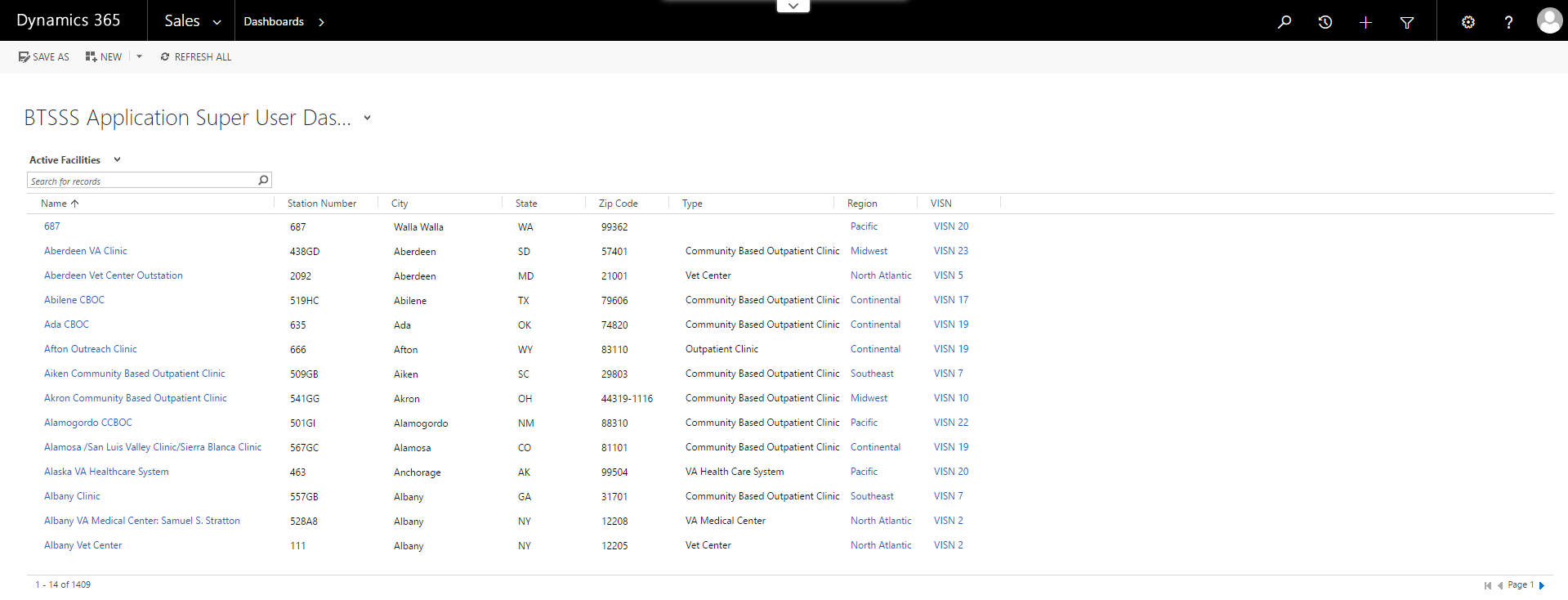
* Travel Clerk

Figure : Travel Clerk Dashboard



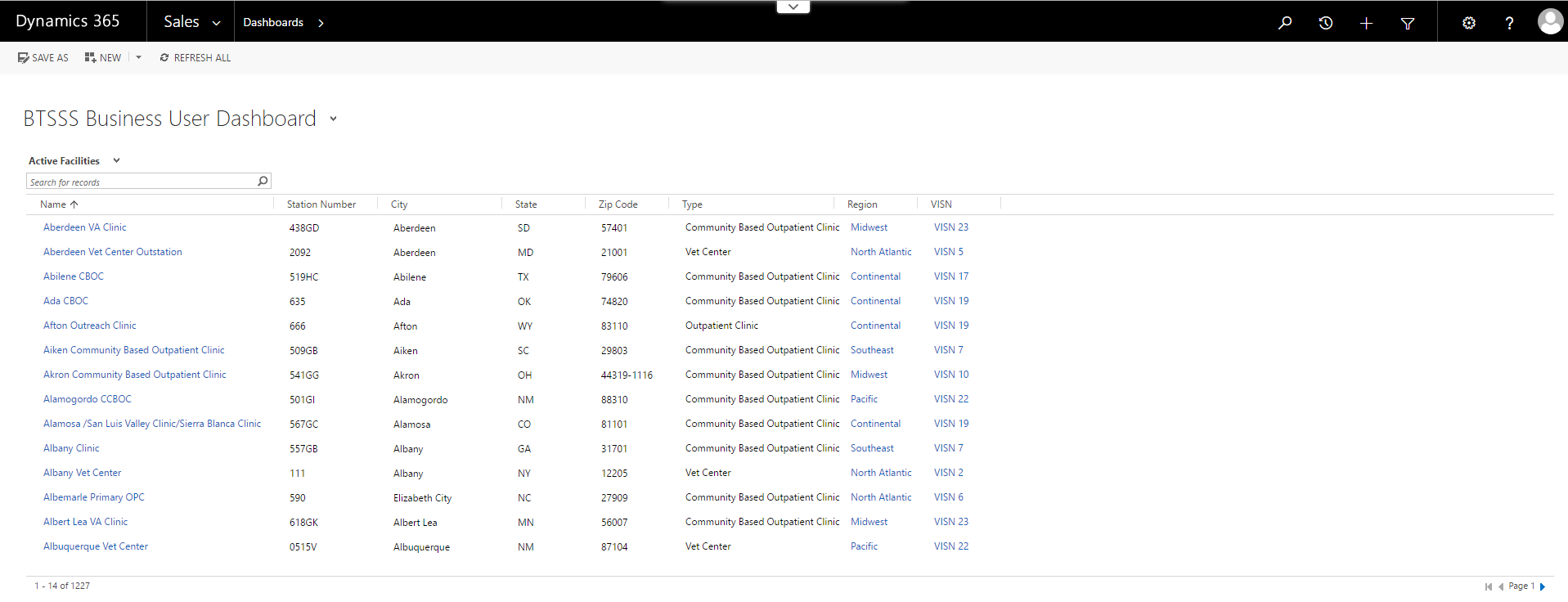
* Application Super User

Figure : Application Super User Dashboard



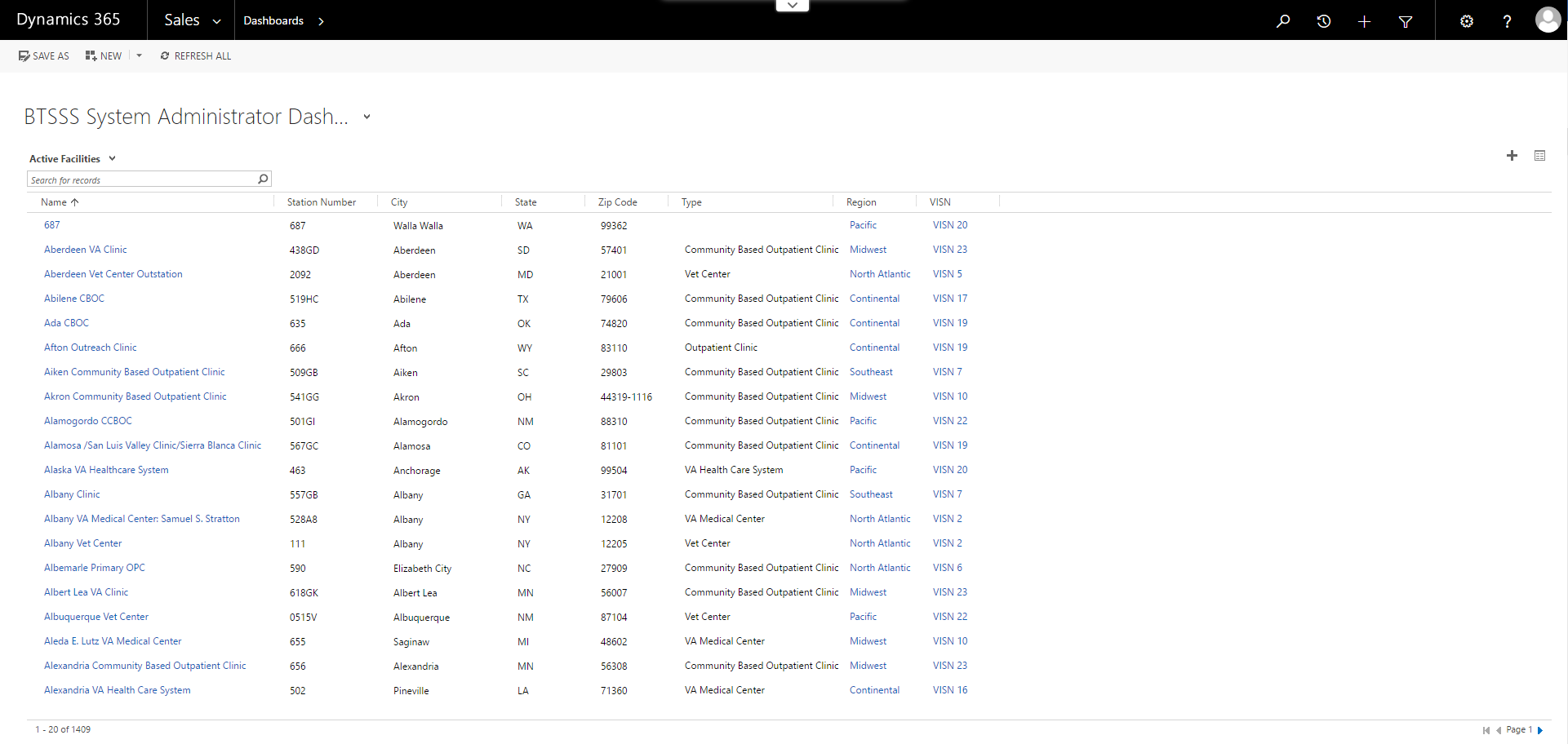
* Business User

Figure : Business User Dashboard



* System Administrator

Figure : System Administrator Dashboard



### Changing User ID and Password

Users cannot currently change their User IDs or Passwords. This section will be updated when the mechanism for performing this task has been chosen and implemented.

### Exit System

To exit the system, the user must quit their browser session.

### Caveats and Exceptions

There are none at this time.

# Using the Software

## Veterans Portal (Beneficiary)

* BT Claimants

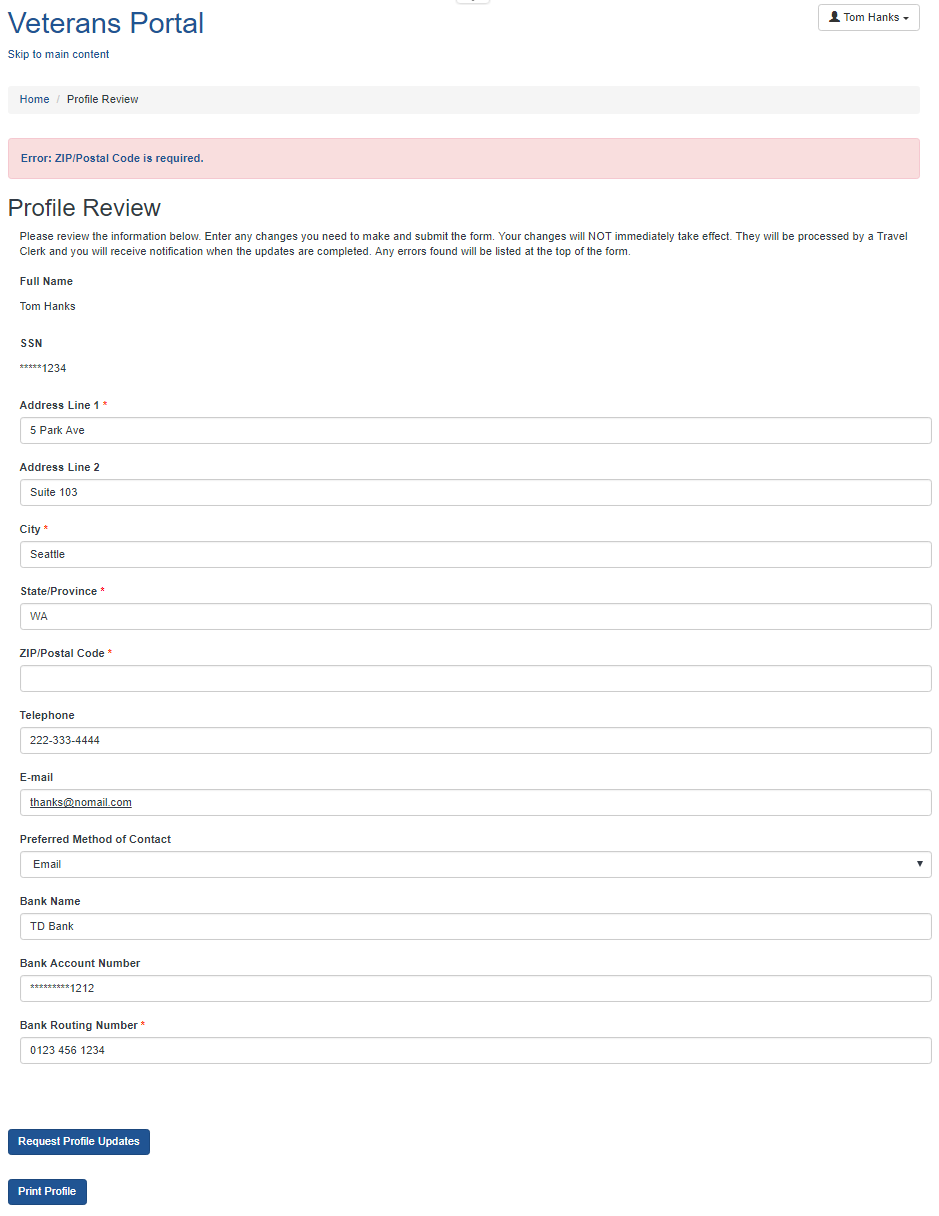
### Updating the Profile

Upon logging in, the user will be directed to review his/her profile information. The following fields are available for review:

* Full Name (uneditable)
* SSN (uneditable, only last four digits visible)
* Address Line 1
* Address Line 2
* City
* State/Province
* ZIP/Postal
* Telephone
* E-mail
* Preferred Method of Contact
* Bank Name
* Bank Account Number
* Bank Routing Number (only last four digits visible)

If any of these fields do not contain data, the user will be presented with the following screen:

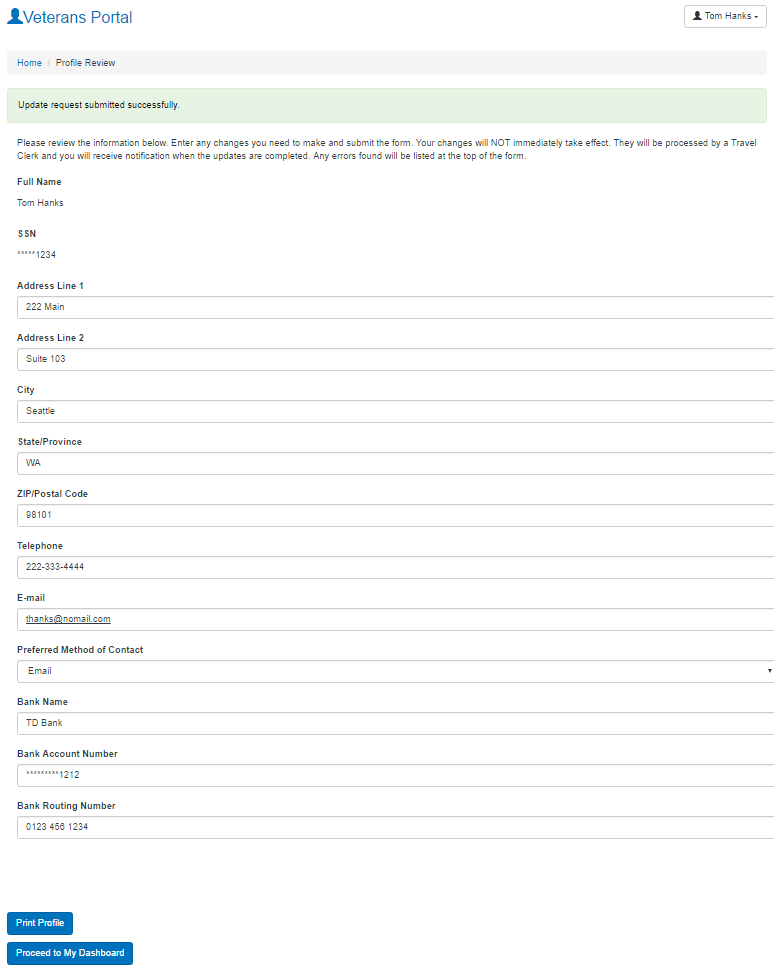
Figure : Update Profile



Fields that require attention will be highlighted in red. The user should supply accurate and up-to-date data for all fields. Once all required data have been updated, the user can click **Request Profile Updates** to submit an update request. Note that the requested changes will be made by a travel clerk. Until this happens, data in the profile will remain unchanged.

Once the request has been made, the user will see the following screen:

Figure : Accurate Profile Information



The user can also click **Print Profile** to print the information in the profile. Note that, for security purposes, the following fields from the profile are not available for printing:

* SSN
* Bank Name
* Bank Account Number
* Bank Routing Number

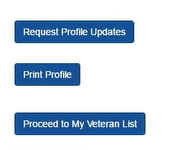
### The Veterans Portal

Once a profile has been reviewed and/or updated, the user may continue into the portal as either a Veteran, a Caregiver who is not a Veteran but who is submitting a claim for the care of one, or a Caregiver who is also a Veteran.

***Veterans*** will be presented with a **Proceed to My Dashboard** button at the bottom of their profile page, as shown in figure 13 above. Clicking this will take the user into the BTSSS portal where they will be provided with a list of current appointments and claims.

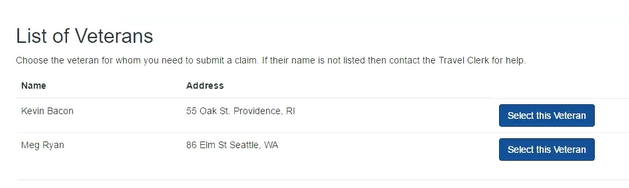
***Caregivers who are not Veterans*** will be presented with a **Proceed to My Veteran List** button at the bottom of their profile page.

Figure : Profile page buttons for Caregivers who are not Veterans



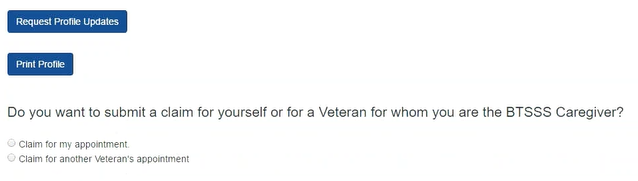
Clicking the **Proceed to My Veteran List** button will present them with a *List of Veterans* they have been assigned as a Caregiver. Clicking the **Select this Veteran** button next to the name of a Veteran will take them to that Veteran’s *My Dashboard* page with a list of that Veteran’s appointments and claims.

Figure : Veteran selection for Caregivers



***Caregivers who are also Veterans*** will be presented with a choice at the bottom of their profile page. They may either proceed to submit a claim for themselves or to submit one for the care of another Veteran by checking the appropriate radio button at the bottom of their profile page.

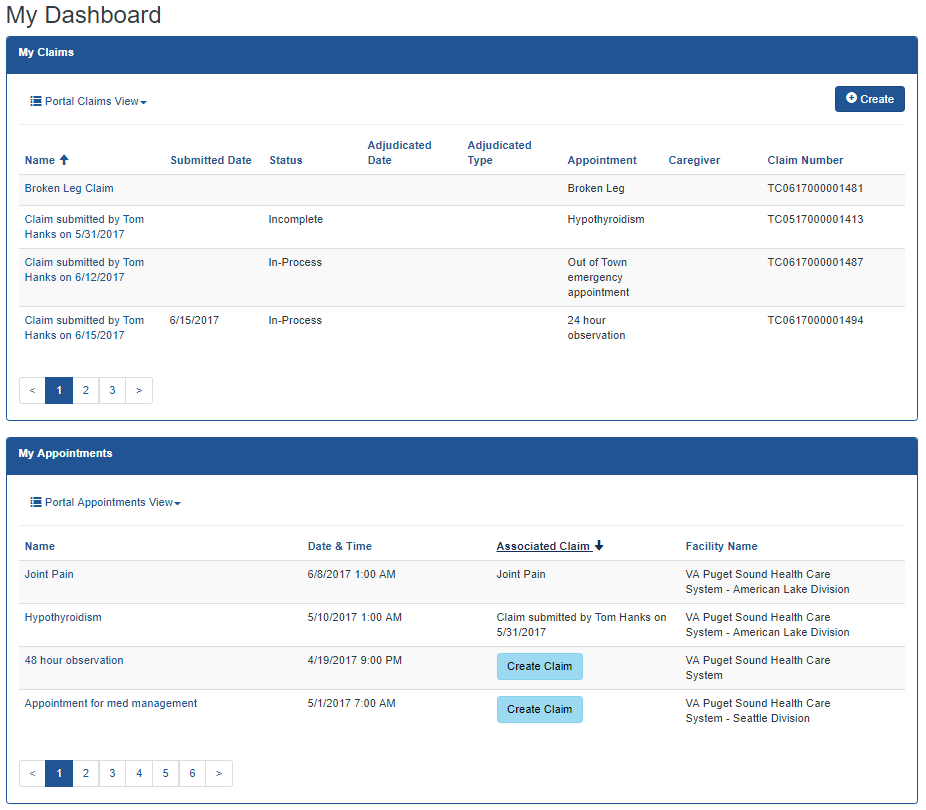
Figure : Profile page buttons for Caregivers who are also Veterans



Selecting “Claim for my appointment” will take them to their dashboard. Selecting “Claim for another Veteran’s appointment” will present them with the **Proceed to My Veterans List** button as shown in figure 14.

The **My Dashboard** that is displayed after proceeding as any of the three types of user described above presents the user with a list of current appointments and claims for the Veteran chosen:

Figure : The BTSSS Veterans Portal – My Dashboard



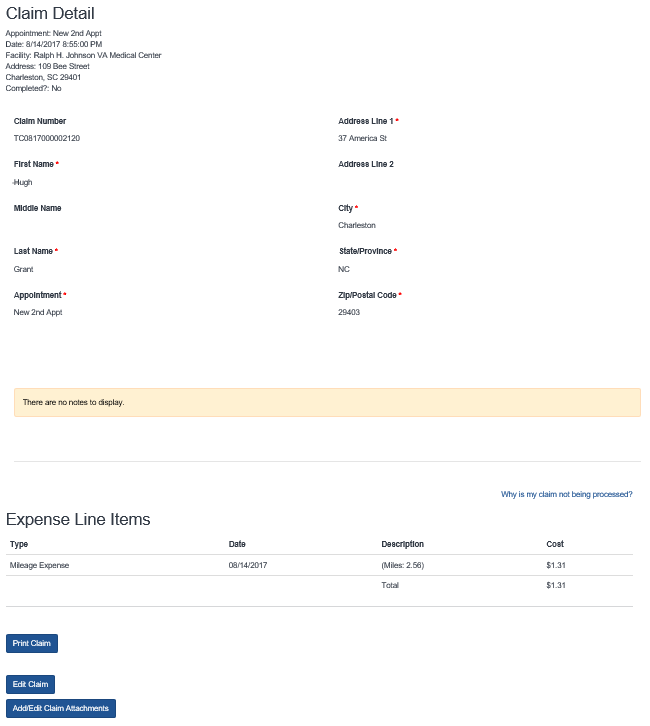
My Claims

The following data fields are available for each claim:

* Name
* Submitted Date
* Type
* Adjudicated Date
* Adjudicated Type
* Appointment
* Caregiver
* Claim Number

The user can sort the list of claims by clicking the field names. Clicking the claim name will display details about the claim and allow the user to enter data and submit the claim.

Figure : Claim Details



The following data fields are available for a claim:

* Claim Number
* First Name
* Middle Name
* Last Name
* Appointment
* Address Line 1
* Address Line 2
* City
* State/Province
* Zip/Postal Code
* Expense Line Items
  + Type
  + Date
  + Description
  + Cost

A claim can be printed by clicking the **Print Claim** button. It can be edited by clicking the **Edit Claim** button. Related documents (DOC or PDF-formatted files only) can be attached to the claim by clicking the **Add/Edit Claim Attachements** button.

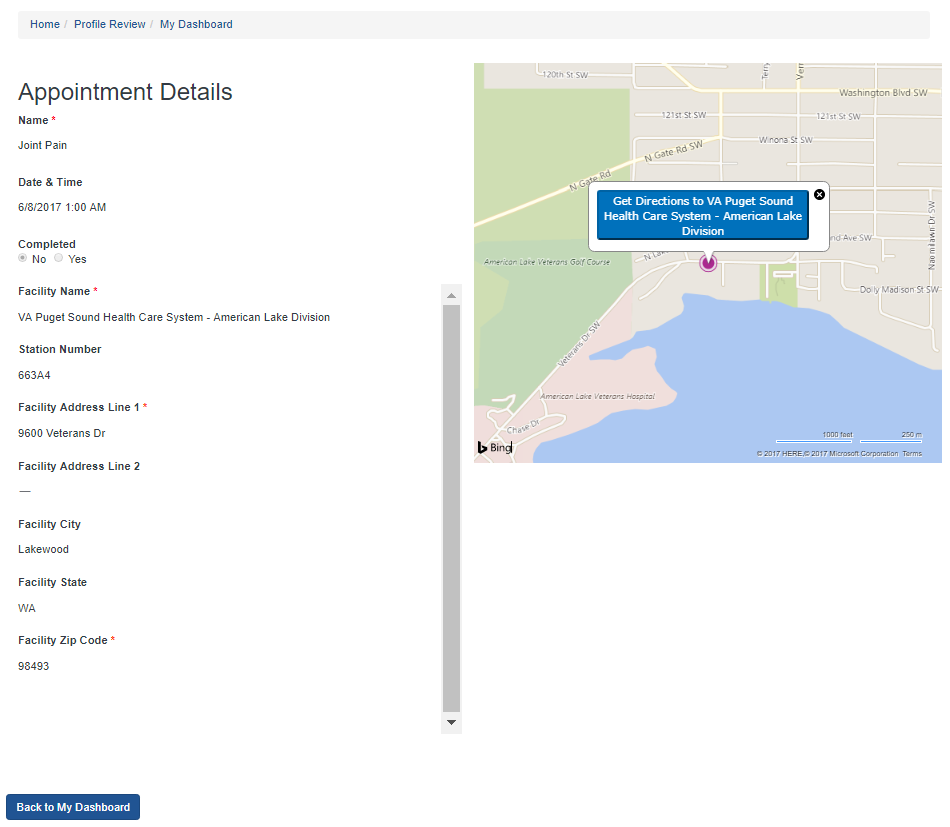
My Appointments

The following data fields are available for each appointment:

* Name
* Date & Time
* Associated Claim
* Facility Name

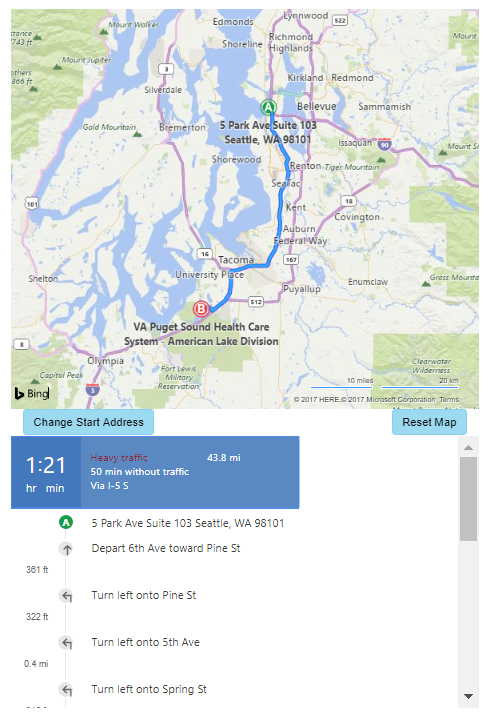
The user can sort the list of appointments by clicking the field names, or filter the appointments by date using the Portal Appointments View dropdown box. Clicking the appointment name will display details about the appointment as well as a map showing the appointment location.

Figure : Appointment Details



The claimant can display directions from his/her home address to the facility by clicking the **Get Directions** link on the Bing map. This will display directions for the default addresses, but also allow the user to go to Bing maps directly if different addresses are required.

Figure : Directions to Facility



Creating a New Claim

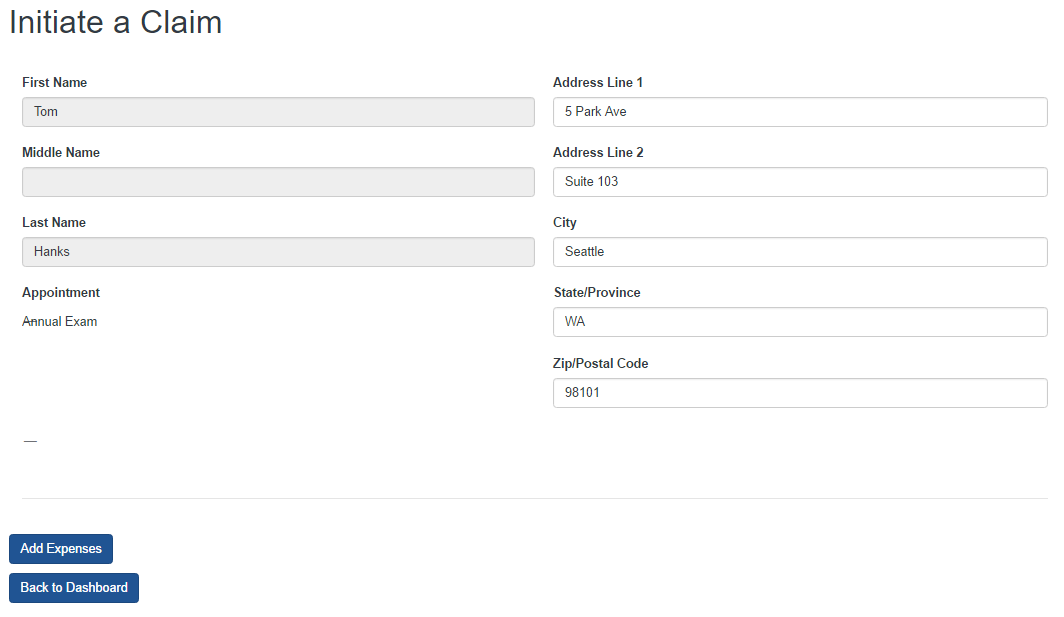
There are two ways for a claimant to initiate a claim:

1. Clicking **Create Claim** for a specific appointment - this will generate a new claim linked to that appointment.
2. Clicking **Create** in the My Claims section - this will generate a new claim that will prompt the claimant to select an appropriate appointment.

Creating a New Claim via My Appointments > Create Claim

To create a new claim associated with a specific appointment in My Appointments, click **Create Claim** for an appointment. This will direct the claimant to the Initiate a Claim screen:

Figure : Initiate a Claim



The claimant’s name and appointment will already be filled in, as well as the claimant’s address. Note that a PO Box will generate an error message.

Creating a New Claim from My Claims > Create

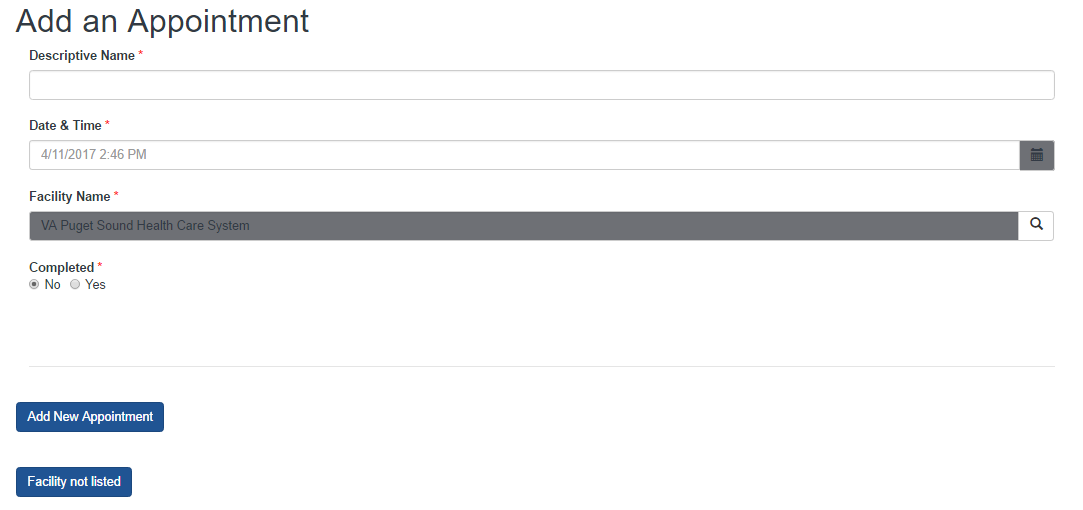
To create a new claim not currently associated with an appointment, click **Create** in the My Claims section. The claimant will be prompted to select an appointment from the list:

Figure : Choose an Appointment



Select the appointment. If the appointment does not appear in the list, click **Appointment not listed.** Enter the name of the appointment, select a date and time, enter the facility name, and choose whether the appointment has been completed. Click **Add New Appointment.**

Figure : Add an Appointment

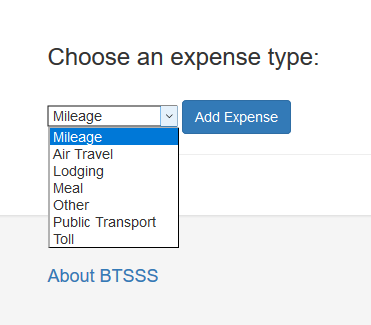


If the facility is not listed, click **Facility not listed.** Enter the Facility Name, Address, City, State, and Zip Code and click **Add New Facility.**

To add expenses for this claim, click **Add Expenses.** The claimant will be prompted to select an expense type from the following list:

* Mileage
* Air Travel
* Lodging
* Meal
* Public Transport
* Toll
* Other

Figure : Choose an Expense Type



1. Mileage Expense (currently the only valid expense type; others coming soon)
2. Fill in the date the expense was incurred and add a description if necessary.
3. Confirm the **From Address** and the **To Address** for the trip. Note that supplying a PO Box is invalid and will generate an error message.
4. Confirm the **Trip Type** (one way or round trip).
5. The **Cost** and the **Mileage Requested** are automatically calculated for the default **From Address**, **To Address** and the selected **Trip Type**.
6. Click **Submit** to save this expense.
7. Review the **Address Verification Results** displayed in the resulting pop-up window to choose the most appropriate verified “from” and “to” addresses recognized by the system and click **OK**. Addresses used to calculate the mileage expense will be updated accordingly.
8. To add another expense, select the type from the dropdown and click **Add Expense.**

Figure : Mileage Expense

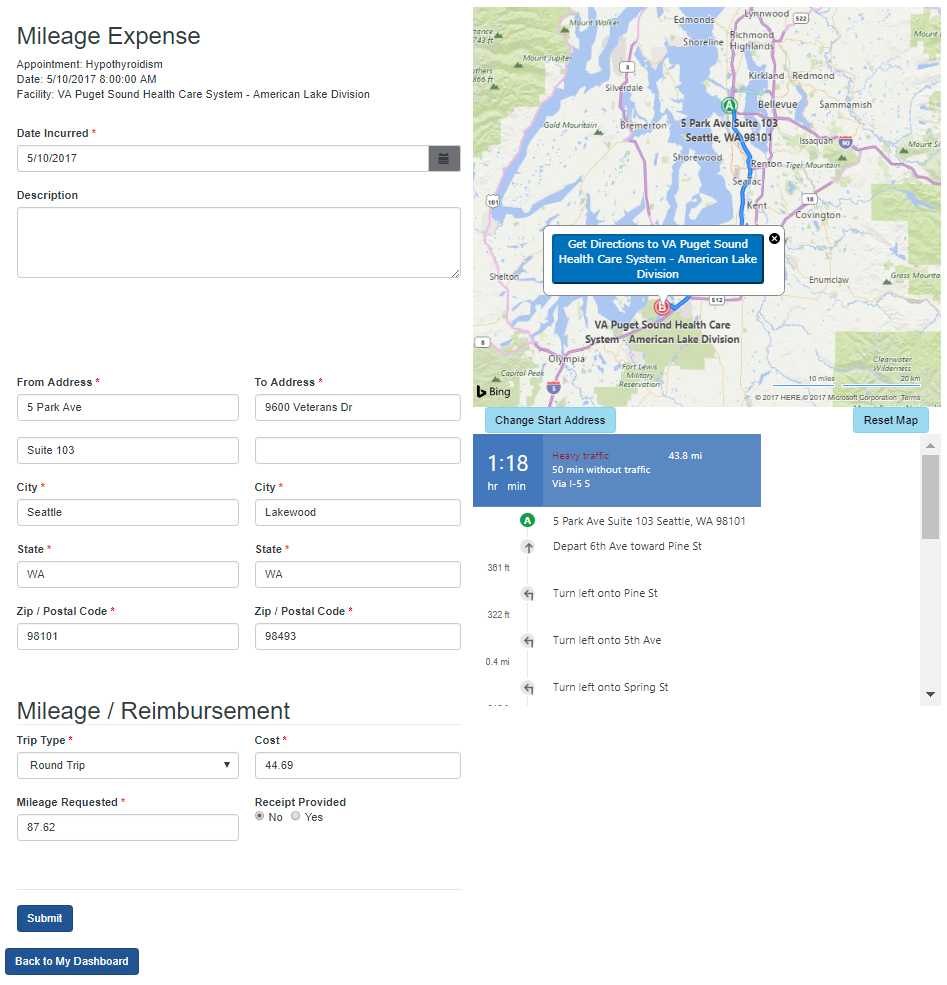
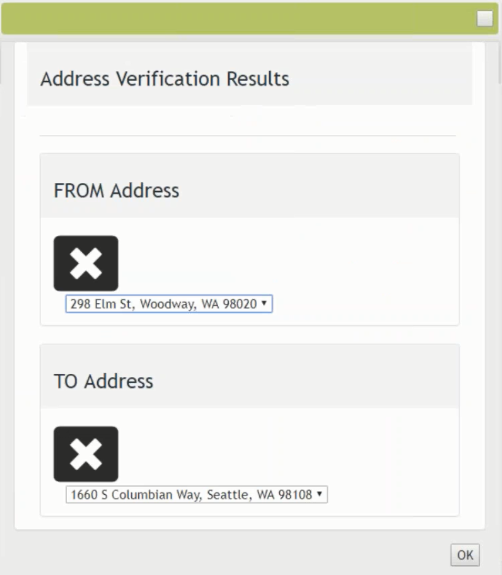


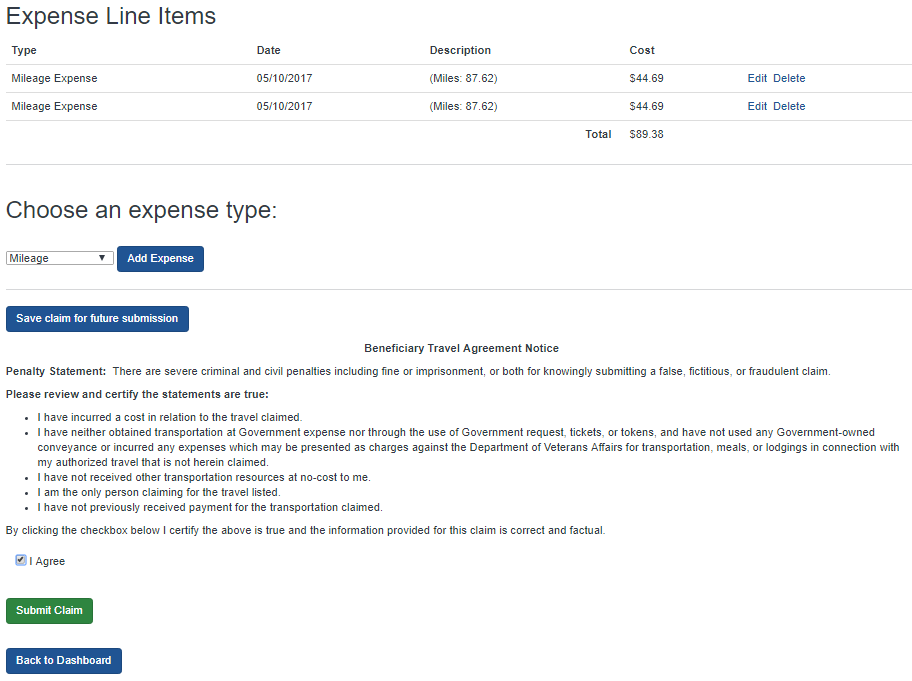
Figure : Address Verification Results pop up on a Mileage Expense form.



1. Air Travel Expense
2. Lodging Expense
3. Meal Expense
4. Other Expense
5. Public Transport Expense
6. Toll Expense

Once an expense has been entered, click **Edit** or **Delete** to the right of the expense on the Claim Details page to change or remove the expense, respectively. Click **Save claim for future submission** to save the claim to finish at a later date, or check the **I Agree** checkbox and click **Submit Claim** to submit a completed claim.

Figure : Expense Line Items and Saving or Submitting a Claim



When a claim is saved, or submitted, there will be two updated records on My Dashboard: the new claim will appear under My Claims, and the appointment will have an Associated Claim under My Appointments:

Figure : New Claim

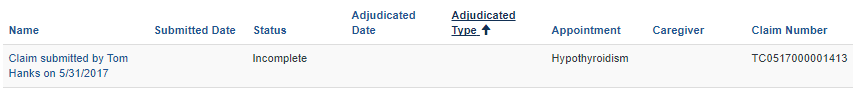
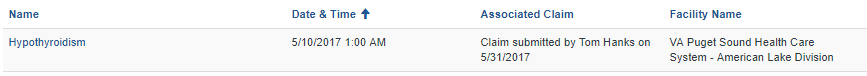
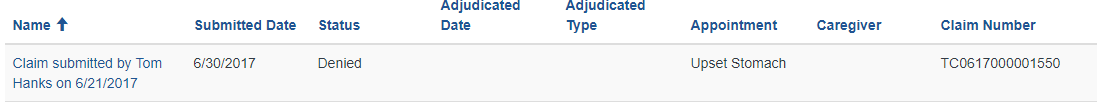


Figure : Updated Appointment



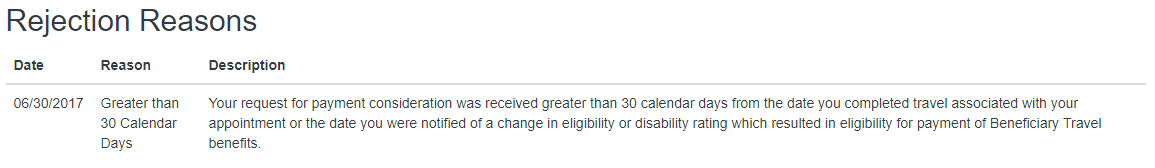
Claims that are submitted but have been denied will show in the user’s **My Claims** list with a status of “Denied.”

Figure : Denied claim in My Claims



Claims that have been denied will contain a **Rejection Reasons** section on the claim page indicating the reason(s) for the rejection.

Figure : Denied Claim Rejection Reason(s)



## CRM (Administrative)

There are four different user roles that will access CRM; each role will have a unique set of functionality available to it. Those roles are:

* Travel Clerk
* Business User
* Application Super User
* System Administrator

### Travel Clerk

The Travel Clerk represents the person(s) responsible for assisting the BT Claimant with issues with their claim.

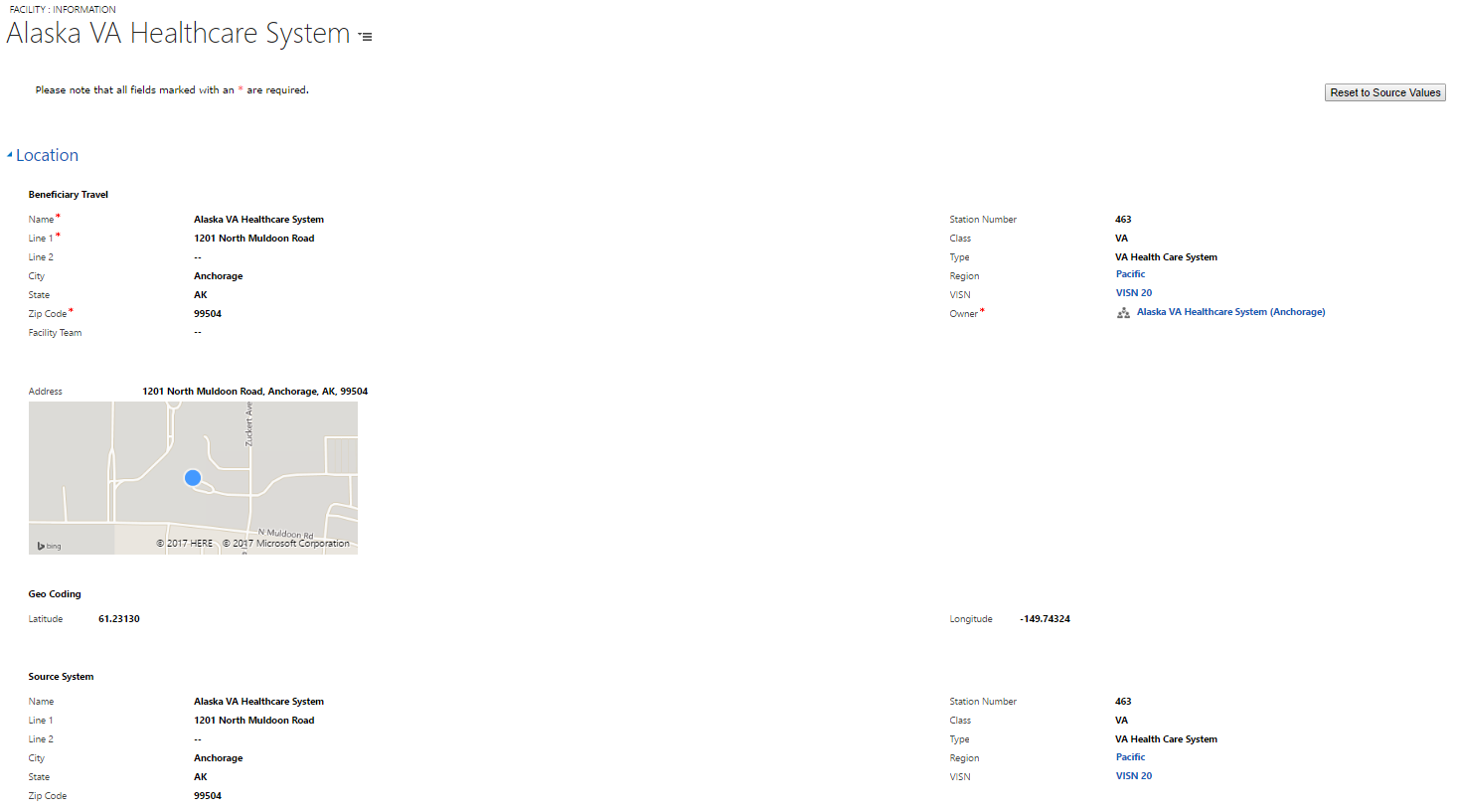
The Travel Clerk has the ability to:

1. Modify facility addresses
2. View beneficiary appointments
3. Create a claim for a beneficiary
4. Process a claim for a beneficiary
5. Create a deductible waiver for a contact
6. Complete beneficiary profile change requests
7. Create or update a contact with the role of Caregiver and/or Veteran
8. Assign Veterans to Caregivers
9. View/complete 30-day Claim Rule Failure tasks

Modify Facility Addresses

To modify the address or other data for a VA facility, the user must find and click the facility from the Facilities section of their dashboard. This will direct the user to the selected facility’s data:

Figure : Facility Data



The facility data screen has three sections:

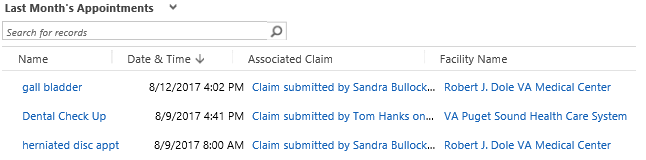
1. The Beneficiary Travel section provides the name and address for the facility, and also includes a map and additional data such as the station number, class, and type of facility. This data is editable by the Travel Clerk.
2. The Geo Coding section provides the longitude and latitude of the facility.
3. The Source System section provides the data for the facility from the source system of record.

The Travel Clerk can edit any of the Beneficiary Travel section data. If the Travel Clerk makes a mistake, he/she can reload that data from the Source System section by clicking **Reset to Source Values.**

View Last Month’s Beneficiary Appointments

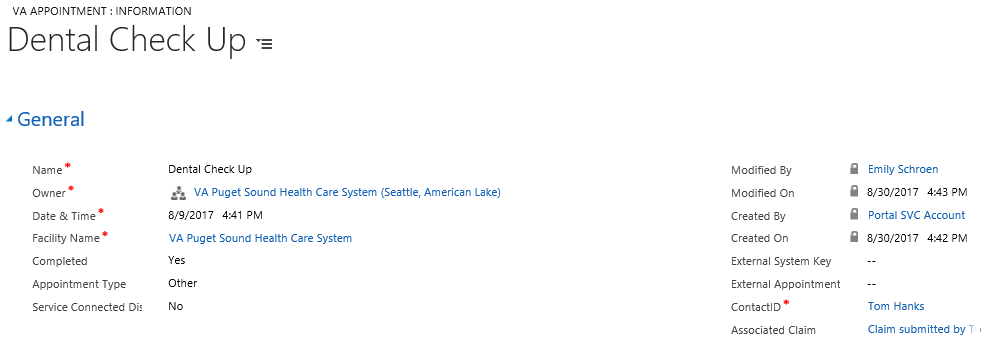
To view last month’s appointments, navigate to the Last Month’s Appointments section of the dashboard:

Figure : Last Month’s Appointments



To view a specific appointment, click on the appointment:

Figure : Appointment Details



[Create a claim for a beneficiary](#Create_a_claim" \t "_blank)

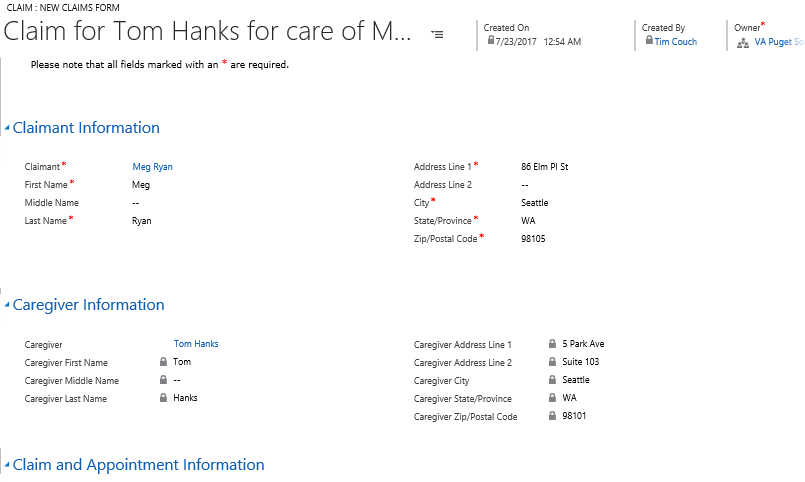
A Travel Clerk can initiate a new claim by one of the following methods:

1. Navigate to the Active Claims page (Menu > Extensions > Claims) and click the New button.
2. Navigate to the contact record for the user (Menu > Customers > Contacts) and click the PLUS (+) button in the Claims section of the Contact record.
3. Navigate to the appointment (Menu > Portals > Extensions > VA Appointments) and click the appropriate appointment. Search for an associated claim, and click the NEW button in the search results.

After having initiated a new claim by one of the above methods:

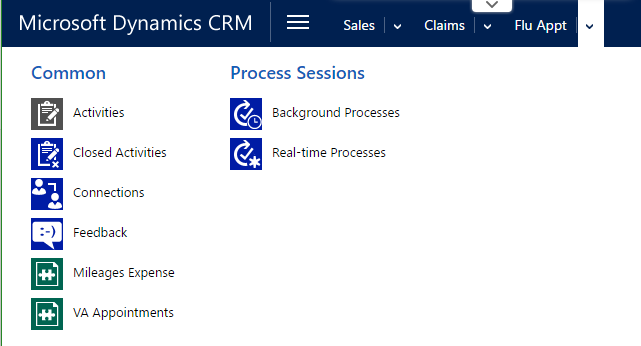
1. Complete the form and click the **Save** (or **Save as Draft**) button. Note that some information may already be filled in depending on which method above was used to initiate the new claim.

Figure : New Claim Form



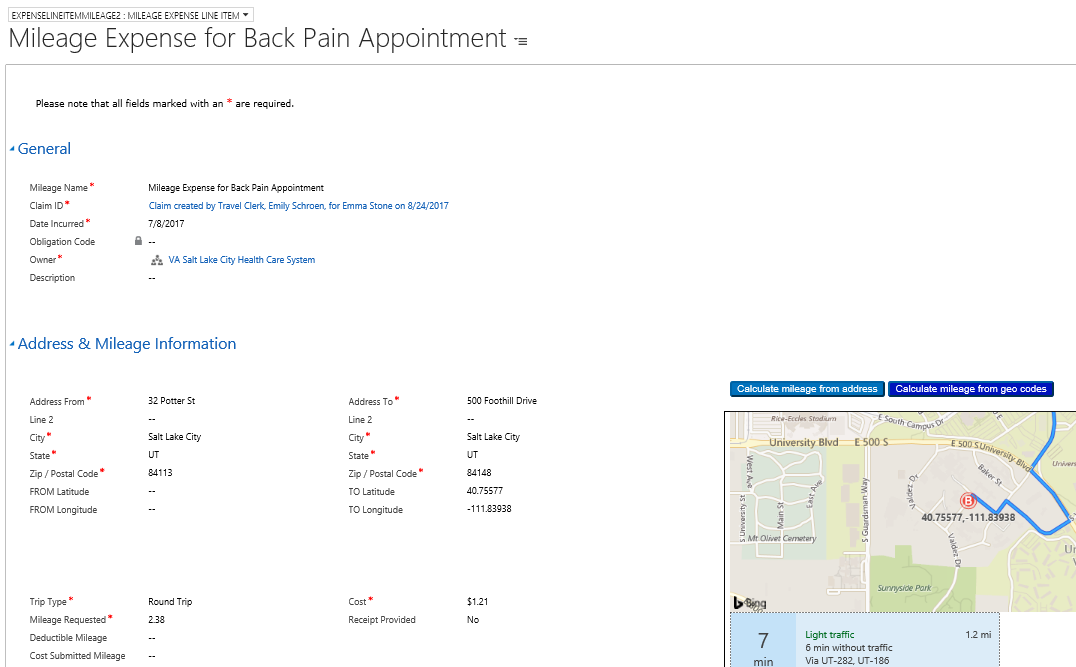
1. To add an expense for the claim, click the down arrow next to the new claim at the top and click Mileages Expense:

Figure : Add Expense



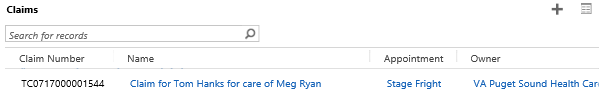
1. Click Add New Expense Line Item on the resulting page.
2. Complete the new expense line item form, including confirmation of Trip Type (Round Trip or One Way) and click **Calculate Mileage**.

Figure : New Mileage Expense



The mileage expense line item is saved to the claim and the window can be closed. The new claim now appears in the Active Claims dashboard:

Figure : Active Claims



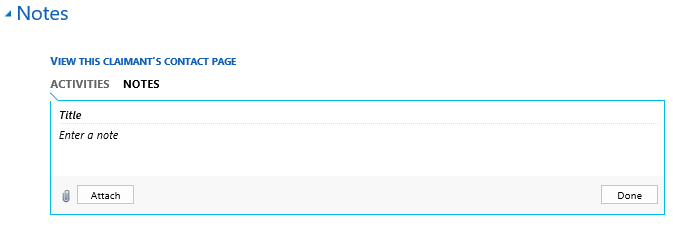
Click the **Calculate Total** button on a claim with expenses to calculate the **Total Cost Requested**:

Figure Calculate Total Cost Requested



Documents (DOC or PDF-formatted files only) related to a claim may be attached to the claim record at any time after a Claim has been created and saved. To do this, scroll down to the Notes sub-grid of the Claim page and click the **Notes** tab. Fields for a document ***Title*** and space to ***Enter a note*** may be completed and the document attached by clicking the **Attach** button and browsing to the appropriate file to be uploaded and attached.

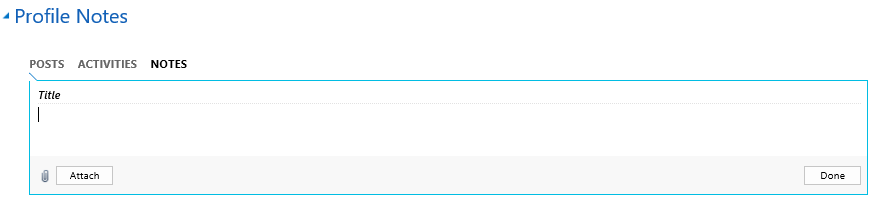
Figure : Attach a file or Add a Note to a Claim



If additional information or documents from the Claimant’s Contact page are needed on the claim, these may be viewed by clicking **View this Claimants Contact Page** to retrieve the information to be added to the Notes section on the claim.

Files and notes may be added to a claimant’s contact page, rather than a claim page, by scrolling down to the Profile Notes sub-grid of the Contact page and clicking the Notes tab. Fields for a document ***Title*** and space to ***Enter a note*** may be completed and the document attached by clicking the **Attach** button and browsing to the appropriate file to be uploaded and attached.

Figure : Attach a file or Add a Note to a Contact



Process a claim for a beneficiary

Submitted claims that do not meet the criteria established by the BTSSS Rules Engine (see Figure 3, above) are not automatically moved to the Pending state for payment and will have a status of “In Manual Review” applied automatically. These claims must be manually reviewed and processed within 72 hours of submission. A task to perform the review will automatically be created in the Travel Clerk’s **My Tasks** section of their dashboard for each claim that fails the criteria applied in the rules engine.

Claims that have a status of “In Manual Review” will show the time remaining to complete the review at the top of the claim page.

Figure : Manual Processing Time to complete a manual claim review

This screenshot from the BTSSS CRM shows the Manual Processing Time remaining countdown timer located at the top of a claim that has a status of “In Manual Review.”

Similarly, they will also display the remaining hours and manual review due date in the Claim and Appointment Information section of the claim.

Figure : Manually Review By date and Hours Remaining to complete a manual claim review

This screenshot from the BTSSS CRM shows the Manually Review By date and Hours Remaining countdown timer in the Claim and Appointment Information section of a claim that has a status of “In Manual Review.”

To manually process a claim, scroll down to the **Rules Engine Messages** section of a claim that has a status of “In Manual Review” and select the **Manual Processing Info** view to filter rules engine messages for those that contain the details related to the specific rule(s) that failed.

Figure : Rules Engine Messages section of the Claim page

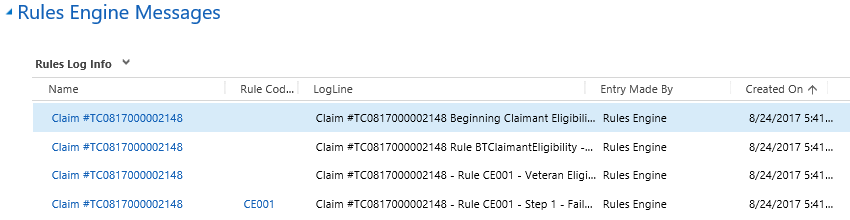
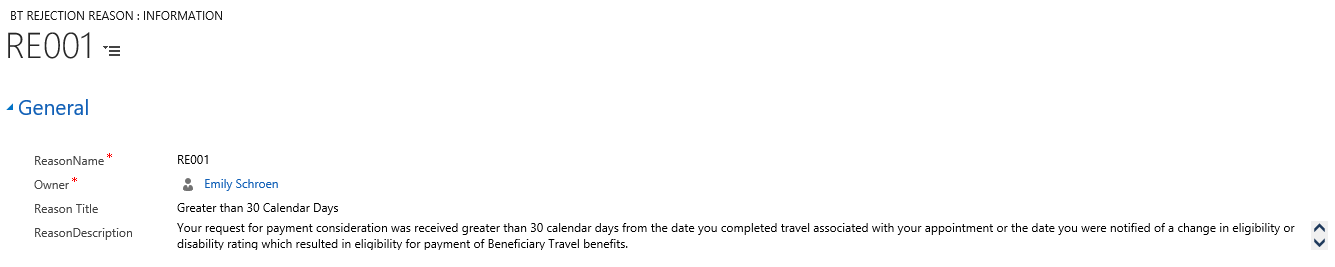
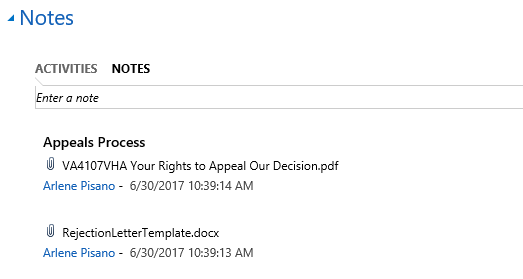
Click the **Rule Code** for any messages in the list to view the details of specific rules that were not met.

Figure : Rule Code details related to Rules Engine Messaging



Pending a review of the rules failures on the claim, a Travel Clerk may change the status of the claim to “Denied” to deny the claim. This action will generate a rejection letter and a note describing the appeals process for this claim, both of which can be found in the **Notes** section of the claim. Tasks to print and mail these to the claimant will be created in the Travel Clerk’s **My Tasks** section of their dashboard.

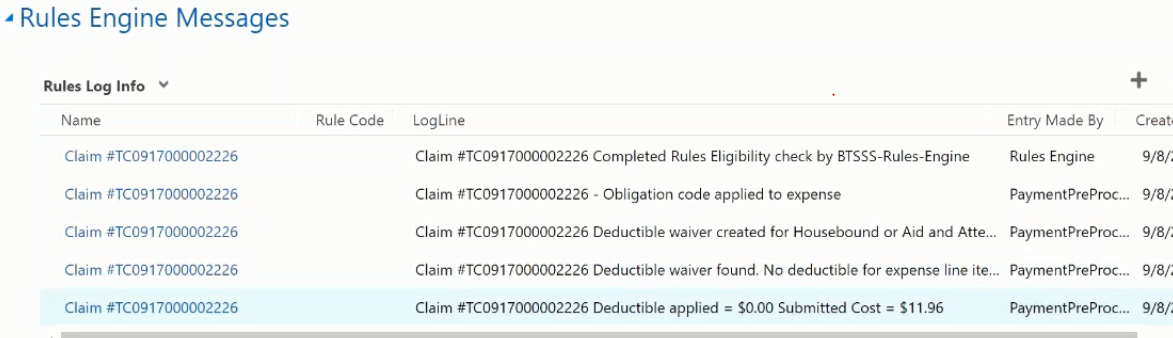
Figure : Notes section of a Claim containing rejection letter and appeals process note



Create a Deductible Waiver for a contact

Deductible waivers will automatically be applied to claims for claimants who satisfy the requirements for a waiver. Details regarding the automatic application of these waivers may be found in the **Rules Engine** sub-grid for those claims where a waiver has been applied.

Figure : Deductible waiver results in the Rules Engine output for a processed claim



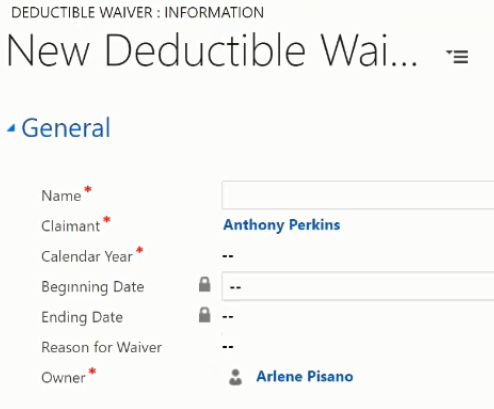
When a claim processed by the rules engine meets the criteria for a deductible waiver, a record of that waiver is automatically created in the **Deductible Waivers** sub-grid of the contact page for the claimant.

Figure : Deductible Waiver sub-grid on a Contact page



Travel Clerks may manually add a deductible waiver for claimants who do not meet the criteria for an automatic waiver by clicking the “plus” symbol on the right side of the Deductible Waivers sub grid.

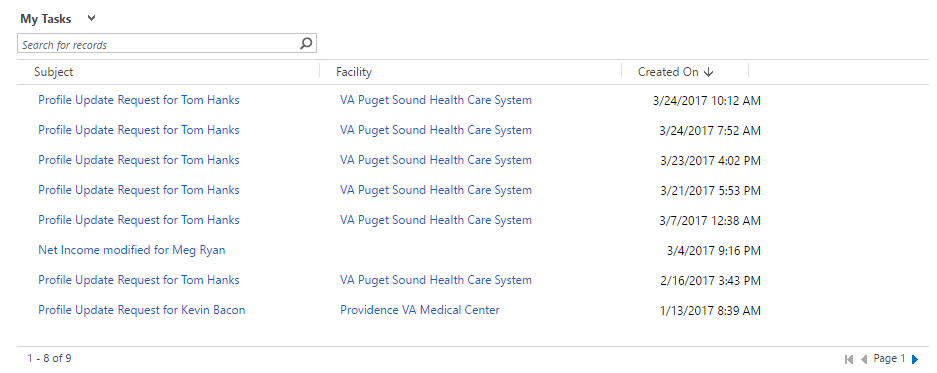
Figure : New Deductible Waiver form to manually add a waiver for a contact



View beneficiary profile data requests

To view any requested profile changes for the Travel Clerk’s facility, the user can view the task list for profile update requests in the Travel Clerk dashboard:

Figure : Profile Update Requests (My Tasks)



To view a request, click it.

Figure : Profile Update Request Record



Each requested change is displayed in the profile update request, with the name of the field, the original value (can be blank), and the new requested value. Note that the Travel Clerk cannot make the changes in BTSSS.

Create or update a contact with the role of Caregiver and/or Veteran

To create or update a contact with the role of Caregiver, select the appropriate value for Caregiver and/or Veteran questions in the Personal Information section of the Contact form and click **save**.

Figure : Setting a Contact as a Caregiver

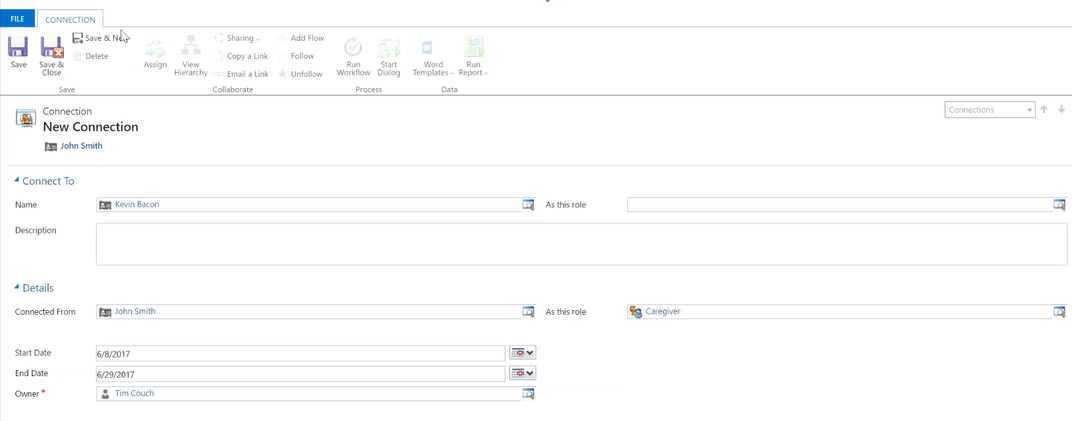


Caregivers are not active until they are activated by the travel clerk. A “Caregiver Approval” task to do this will appear in the travel clerk’s My Tasks inbox once the caregiver status has been saved for the contact. Clicking the contacts name in the Caregiver Approval task will open the contact for the travel clerk to activate the contact as a Caregiver.

Assign Veterans to Caregivers

Contacts who are Caregivers can have Veterans assigned to them for the purpose of submitting claims for their care. To do this, open the contact who is a caregiver and click **Connect** in the menu above the Caregivers name to open a New Connection form. In the Connect To section of the form, search for and select the assigned Veteran. In the Details section of the form the default value in the Connected From field will be the Caregiver’s name. Select “Caregiver” in the **As this role** field of the form and set Start and End Dates for the period of time the Caregiver will have this role and save.

Figure : Assigning a Veteran to a Caregiver



When a Caregiver is assigned to a Veteran, the Caregiver will show in the Caregiver Information section of the contact page for that Veteran. Similarly, the Veteran will show in the Caregiver Information section of the contact page for that Caregiver under “Veterans Cared For.”

### Business User

The Business User represents the person who utilizes the BTSSS data for business intelligence and reporting analysis.

### Application Super User

The Application Super User represents the person who is engaged in report design/customization, workflow design/modification, and parameters configuration setup/modification.

The Application Super User has the ability to:

1. Create a new facility record.
2. Add a team to a facility.

Create a new facility record

To create a new facility, the user must navigate to Menu > Service > Extensions > Facilities and click on **New** button in the upper left corner.

Figure : Active Facilities

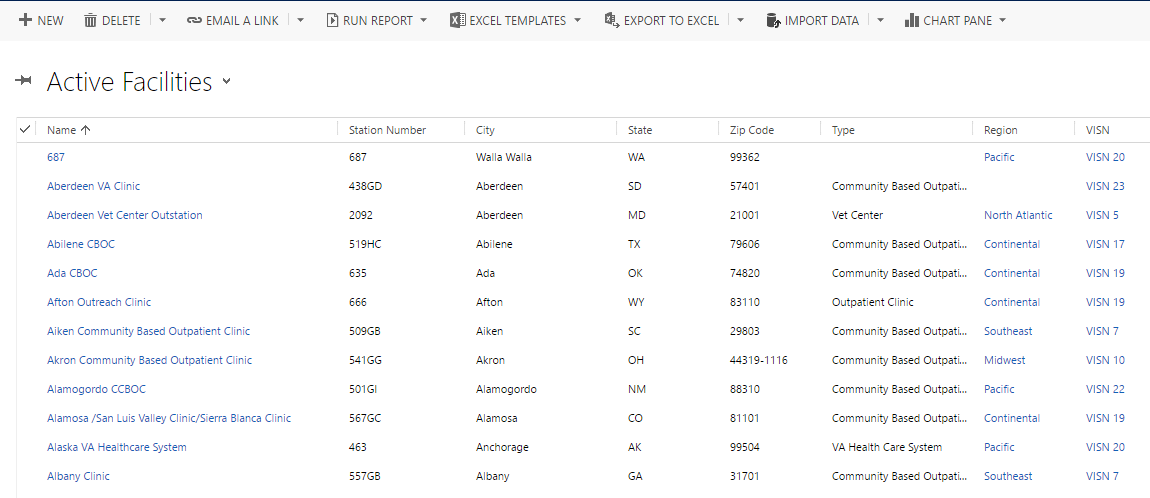
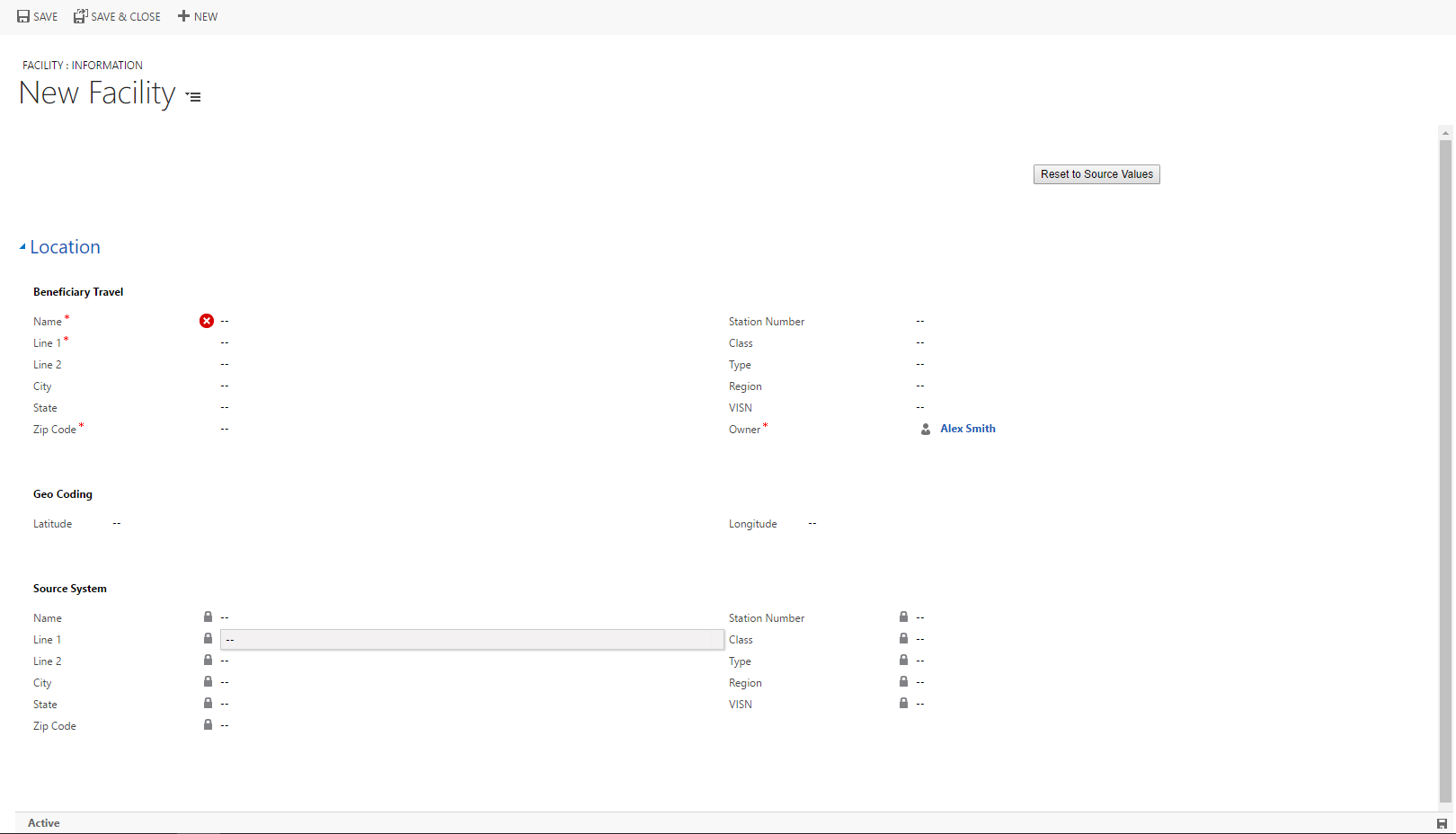


Figure : New Facility



Fill out the information in the New Facility form and save by clicking the icon in the lower right or the button in the upper left. The new facility will then appear in the Active Facilities list.

Add a team to a facility

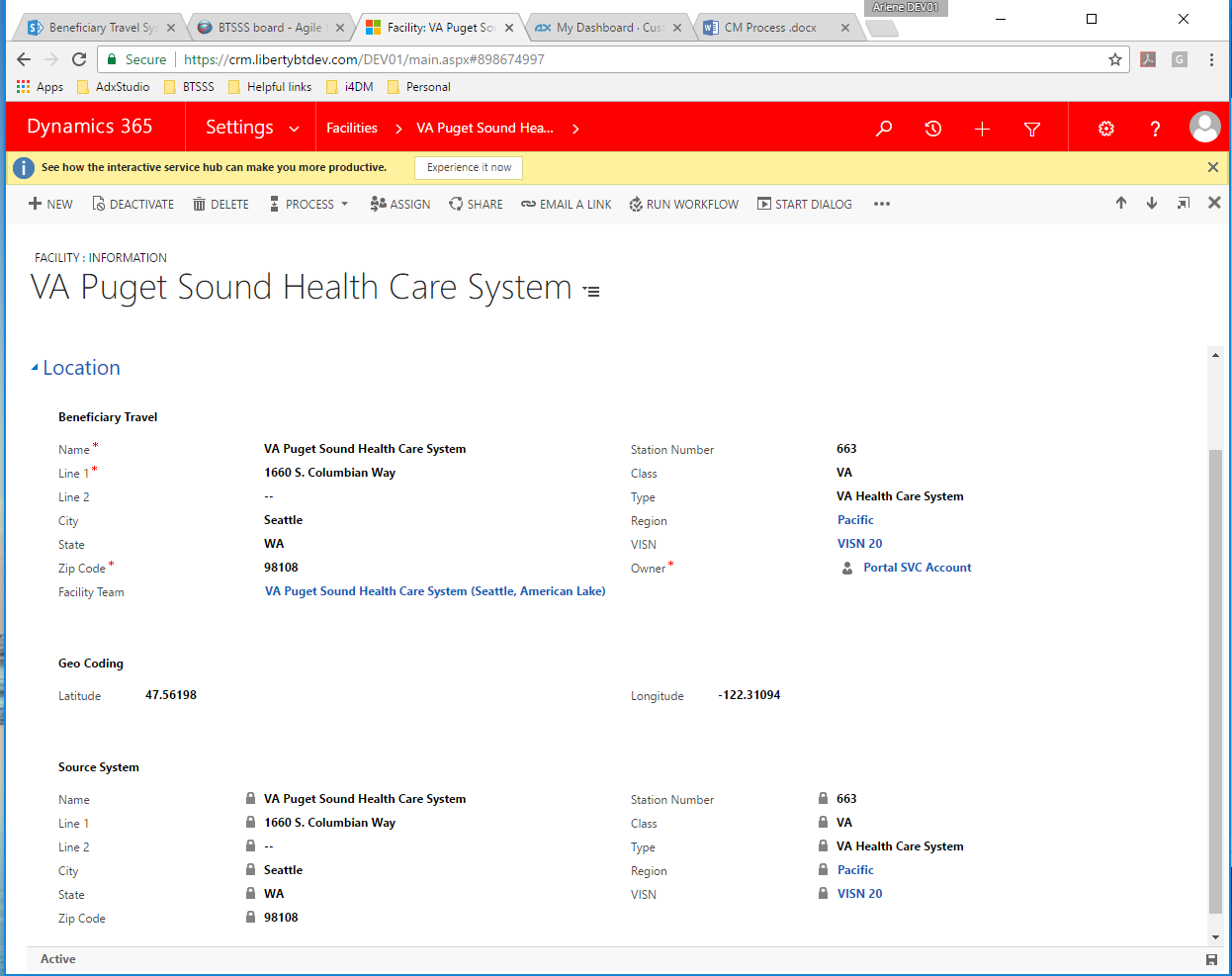
A team is a group of users at a facility. An Application Super User can assign a team to a facility in CRM. Go to Menu > Settings > Extensions > Facilities:

Figure : Facilities



Select the desired facility from the list. In the Facility Team field, search for and select the correct team. Once selected, click the save icon.

Figure : Update Facility Team



### System Administrator

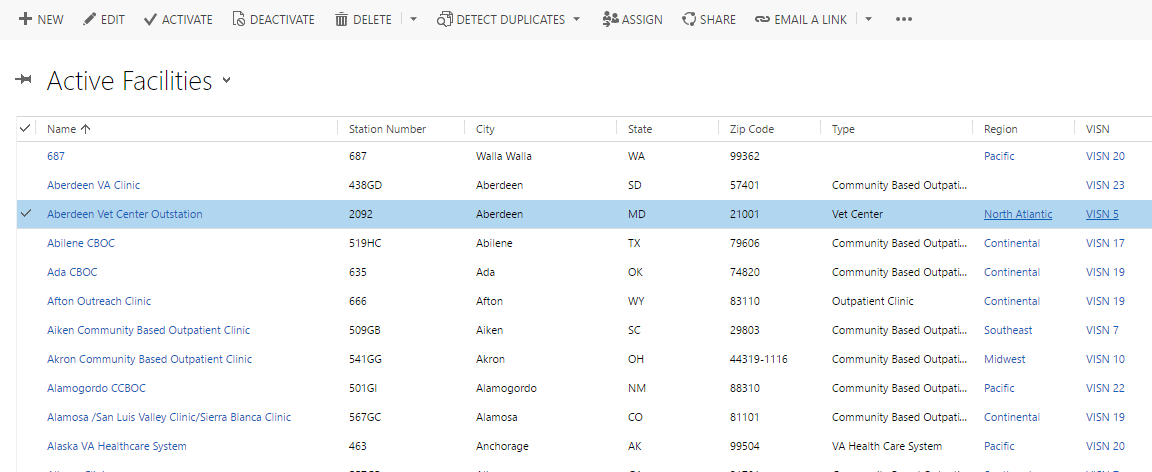
The System Administrator represents the person who has full control on the system.

1. Delete a facility record.
2. Configure System Level Rules.
3. Configure Facility Level Rules.
4. Add a team to a facility.

Delete a facility record

To delete an existing facility record, navigate to Menu > Service > Extensions > Facilities. In the list of Active Facilities, check the row of the facility to delete and click the Delete button at the top.

Figure : Delete a Facility



Configure System Level Rules

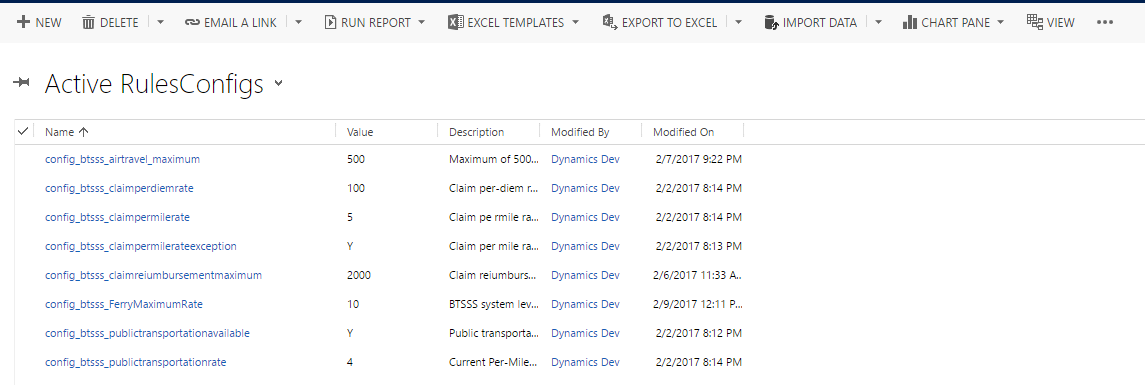
A System Administrator has the ability to set specific rules system-wide, such as setting a limit on bus fare or mileage. These rules can be overridden at the facility level. To create a new rule, go to Menu > Settings > Extensions > RulesConfigs:

Figure : RulesConfigs



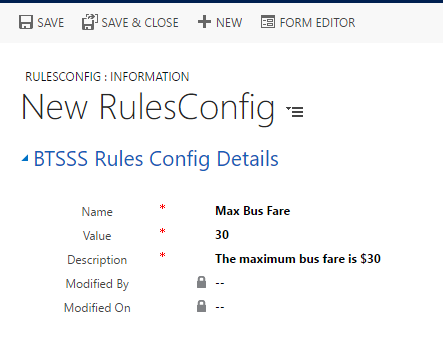
All current rules are listed under Active RulesConfigs:

Figure : Active RulesConfigs List



To create a new rule, click the **New** button in the upper left corner. In the New RulesConfig screen, enter the Name, Value, and Description of the new rule and click **Save:**

Figure : New RulesConfig



The new rule will appear in the Active RulesConfigs list.

Configure Facility Level Rules

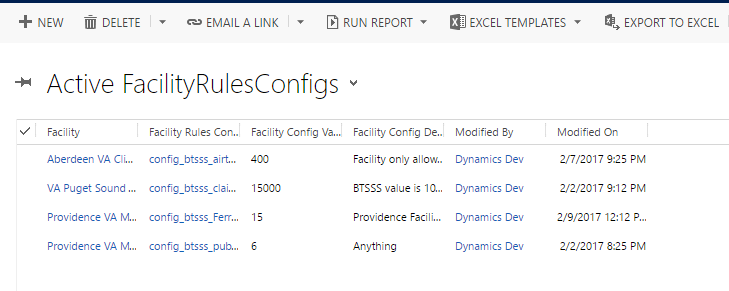
A System Administrator can also configure rules specifically for facilities that will override system-wide rules. To create a new rule, go to Menu > Settings > Extensions > RulesConfigs:

Figure : FacilityRulesConfigs



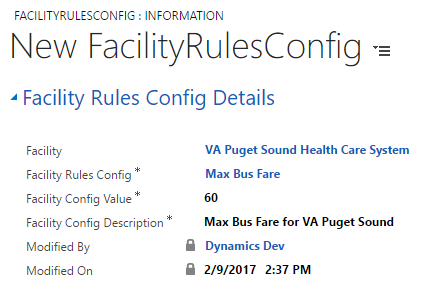
All current rules are listed under Active FacilityRulesConfigs:

Figure : Active FacilityRulesConfigs



To create a new rule, click the **New** button in the upper left corner. In the New FacilityRulesConfig screen, enter the Facility, select the appropriate system-wide rule, and enter a Value and Description of the new rule and click **Save:**

Figure : New FacilityRulesConfig



Add a team to a facility

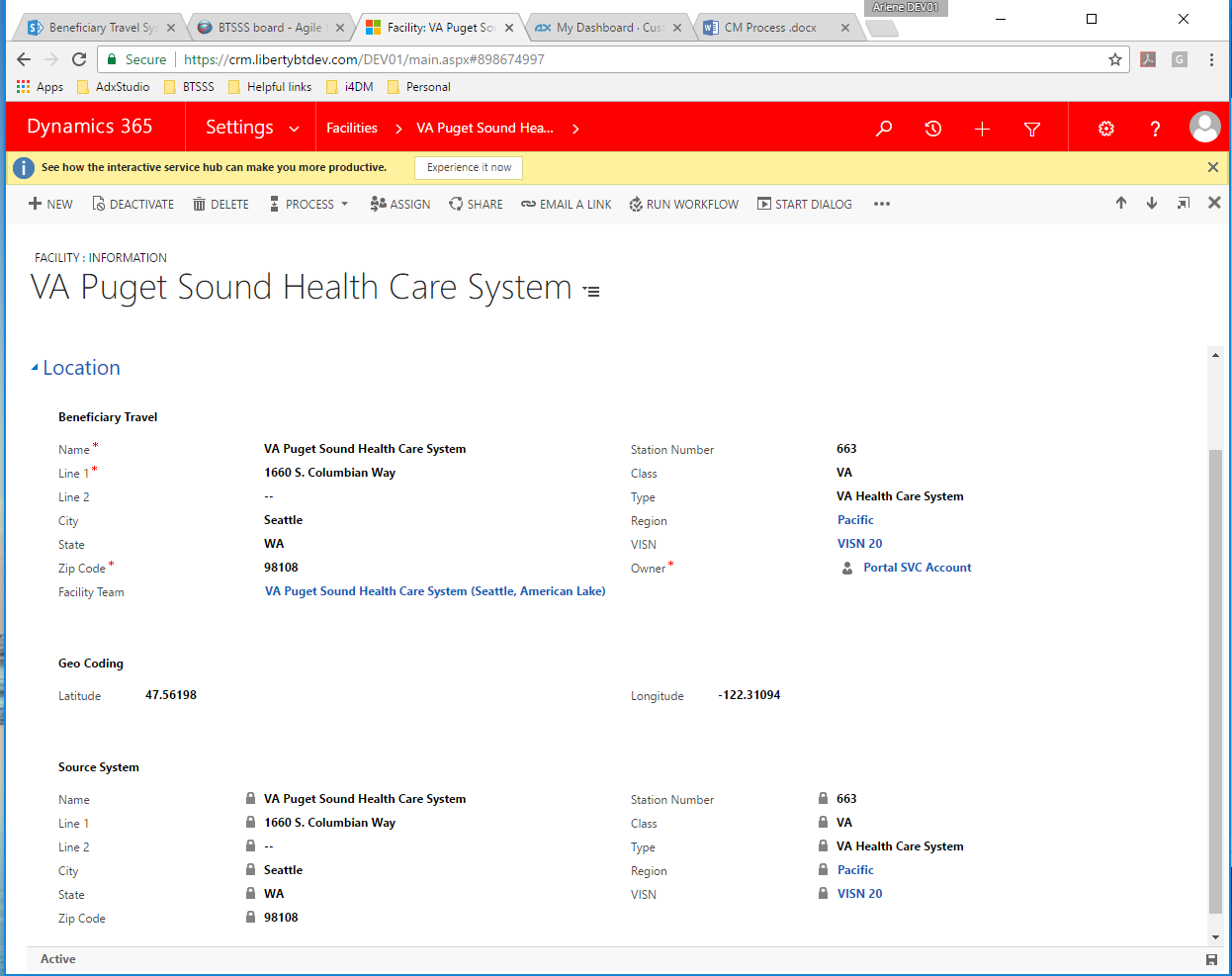
A team is a group of users at a facility. A System Administrator can assign a team to a facility in CRM. Go to Menu > Settings > Extensions > Facilities:

Figure : Facilities



Select the desired facility from the list. In the Facility Team field, search for and select the correct team. Once selected, click the save icon.

Figure : Update Facility Team



# Troubleshooting

There are no known problems anticipated or otherwise. For assistance with problems with the system the user should follow existing procedures for help.

## Special Instructions for Error Correction

There are no special instructions for Error Correction associated with the new reports implemented in the Fee Payment Processing System (FPPS).

# Acronyms and Abbreviations

Table : Acronyms and Abbreviations

| Term | Definition |
| --- | --- |
| BN | Business Need |
| BT | Beneficiary Travel |
| BTSSS | Beneficiary Travel Self-Service System |
| COTS | Commercial Off-the-Shelf |
| CRM | Customer Relationship Management |
| EFT | Electronic Funds Transfer |
| FMS | Financial Management System |
| FPPS | Fee Payment Processing System |
| FY | Fiscal Year |
| OI&T | Office of Information and Technology |
| OIG | Office of Inspector General |
| QA | Quality Assurance |
| RSD | Requirements Specification Document |
| VA | The Department of Veterans Affairs |
| VHA | Veterans Health Administration |
| VPS | Veteran Point of Service |

# Appendix

Not Applicable.

# Index

Not Applicable.