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**FISCAL YEAR 2000 DECISION SUPPORT SYSTEM (DSS)
OUTPATIENT IDENTIFIERS**

1. PURPOSE: This Veterans Health Administration (VHA) Directive defines the Decision Support System (DSS) Identifiers. *NOTE: DSS Identifiers are also known as stop codes.* It is a guide to the operational set-up of DSS Identifiers by local VA medical center Health Administration Service staff. It informs major users of VHA Ambulatory Data Sets concerning the current descriptions and definitions of VHA outpatient workload centers (production units).

2. BACKGROUND: For more than 20 years, VHA has collected ambulatory care data which supports the continuity of patient care, resource allocation, performance measurement, quality management and research, and improves third-party payment or collections. The DSS Identifiers assist Department of Veterans Affairs (VA) medical centers in defining outpatient production units, which are critical for costing outpatient VHA work. In the absence of sufficient Ambulatory Care case-mix indicators, DSS Identifiers or Stop Codes have a value for grouping like-types of care both for economic and resource utilization analysis.

a. Fiscal Year (FY) 2000 DSS Definitions

(1) **Definition of DSS.** DSS provides information to support VHA business needs including: multi-pay or revenue determination; product and case-costing; resource utilization tracking; quality indicators; retrospective review of groups of cases for various quality protocols, reimbursement modeling and annual VA medical center and Veterans Integrated Services Network (VISN) budgeting.

(2) **Definition of DSS Identifier.** A DSS Identifier is a VHA term, effective October 1, 1996, that characterizes VHA Ambulatory Care Clinics by a six-character descriptor. The DSS Identifier value is transmitted to the National Patient Care Database (NPCD) with each separate outpatient encounter into the NPCD field "DSS Identifier." A primary stop code and a secondary stop code compose the DSS Identifier.

(a) **Primary Stop Code.** The first three characters of the DSS Identifier represent the primary stop code. The primary stop code designates the main Ambulatory Care Clinical Group or production unit responsible for the clinic. Three numbers must always be in the first three characters of a DSS Identifier for it to be valid.

(b) **Secondary Stop Code.** The last three characters of the DSS Identifier contain the secondary stop code which serves as a modifier to further define the primary work group. The VA medical center uses the secondary stop code, when appropriate, as a modifier of the work in the primary Ambulatory Care work unit (primary stop code).

1. The secondary stop code modifier can represent the type of services provided. A Diabetes Specialty Clinic, for example, that also gives Primary Care services to Diabetic patients would have a DSS Identifier, 306 Diabetes (the primary stop code to designate the work group) and 323 Primary Care Medicine (the secondary stop code to designate the services provided).

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2. The secondary stop code modifier can represent the type of provider or team. For example, a Primary Care Team clinic run by a nurse for health education can be designated 323117.

3. The secondary stop code modifier can also represent a specially funded program. For example, an Alcohol Abuse clinic within a Substance Abuse work group would be 513 (Substance Abuse Individual Counseling), 461 (Alcohol Specially-funded Program).

(c) The NPCD. Since 1997, the NPCD has generated a Statistical Analysis System (SAS) file in Austin Automation Center (AAC) which includes a six-character DSS Identifier, and a field for each primary and secondary stop code components for each outpatient encounter. This is reported for the SC file (an Austin outpatient SAS file that lists outpatient encounters by Current Procedural Terminology (CPT) code with the six character DSS Identifier for each encounter) of the AAC Outpatient Clinic (OPC) SAS file. This enables national database users to search on the secondary stop code modifier for additional workload provided by an Ambulatory Care work group. For example, a search on stop code 323 (Primary Care Medicine) used as the secondary stop code would provide additional Primary Care workload for national analyses from the SC file of the OPC SAS file. The SF file (another Austin outpatient SAS file that lists daily outpatient encounters by Social Security Number (SSN) and by primary stop code) puts primary and secondary each as a separate stop in the stop code column. **NOTE:** *NPCD outpatient encounters are reported for workload using only the primary DSS identifier.*

(3) **Importance of DSS Identifiers.** DSS Identifiers are the single and critical designation by which VA defines outpatient production units or clinical work units. **NOTE:** *For Medicare cost reports, VA needs to have production units in the clinic or "Ambulatory Care Revenue Centers." DSS Identifiers have been used to designate these medicine work units for outpatients.*

(a) Standardization. It has become increasingly important that VA medical centers standardize the use of DSS Identifiers and not deviate from nationally directed standards. **NOTE:** *This is especially true in critical areas like Ambulatory Surgery, Primary Care, and Observation.*

(b) Relationship to the Cost Distribution Report (CDR). For FY 1997 and thereafter, the CDR extracts only the primary stop code portion of the six character DSS Identifier for CDR work purposes.

(4) **Basis of DSS Identifiers and a Major Principle of DSS Identifier Set-up in FY 2000**

(a) A major clarification in the future use of VHA stop codes was made at the final Ambulatory Care Redesign meeting in November 1995, in the Medical Care Cost Fund (MCCF) Program Offices in Washington, DC.

1. Since 1997, the use of stop codes has been focussed on two important purposes:

a. To indicate the outpatient work group (or production unit) which was responsible for providing the specific set of clinic products; and

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b. To serve as stable, VA medical center-specific products which could be used to compare costs between sites over the years when attached to a value for scheduled-time and other modifiers; i.e., as the DSS feeder key for Ambulatory Care products.

2. The diagnostic information for Ambulatory Care patients is taken from International Classification of Disease, 9th Edition (ICD-9) codes. Billing code functionality is taken from the billing codes that are used by the Health Care Finance Administration (HCFA) CPT codes for outpatient facility and provider. ***NOTE:** This permits VHA to conform in its MCCF billing with the private sector billing practice.*

(b) Many VHA national database users actively use the DSS Identifiers for workload searches to indicate the general type of work, as well as the type of production unit creating this work, for example:

1. CDR;

2. VHA reimbursement office, i.e., Allocation Resource Center (ARC) - Veterans Equitable Resource Allocation (VERA);

3. Clinical program offices;

4. Health Service Research and Development (HSR&D); and

5. National VHA Performance Measures.

(c) Others depend on VHA stable and reliable stop codes to represent similar work for outpatient care in VHA National Databases over the years.

b. **Caution on Use of the Autobiller Function**

(1) VA medical centers are not to bill for work not performed or for work not eligible for reimbursement. Sites have the ability to make a stop code or a clinic “NOT AUTOBILLED.” This means that bills would not be created by the autobiller, but does not necessarily mean these clinics are not billable, and bills could be created by the billers.

(2) A list of DSS Identifiers and/or credit pairs (stop codes) that should be always marked as “Not Billable” is in Attachment M. All products (clinics) with these identifiers **are not to be billed**. These include the Telephone Clinics, Research, and the Employee, Women’s Stress, and Sexual Trauma counseling stops.

(3) All products (clinic names) on the “Sometimes Not-Billable” List of DSS Identifiers, in Attachment N, should be carefully reviewed by MCCF, Health Information Management Systems (HIMS), and DSS to determine if the clinics should be marked as “not billable.” Close attention should be paid to the treatment that was actually provided and the level of the

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professional in attendance for clinics with these stop codes. ***NOTE:** In some states billing may be possible, in other states certain counseling professionals cannot be billed.*

(4) The issue of billing for global services needs to be addressed when reasonable charges go into effect for the all pre-bed stop codes; these are 331, 221, 416, 419, 422, 432, and 433.

d. Use of Stop Codes in VA Medical Centers with Text Integration Utility (TIU) or Clinic Patient Record System (CPRS)

(1) **Initiation.** In FY 1999, several VA medical centers started to use TIU, which is a prerequisite for CPRS.

(2) **Problems with Unscheduled Visits on TIU.** When a VA medical center outpatient provider is using the Event Capture System (ECS) to send data to Patient Care Encounter (PCE) automatically, a problem is encountered if a TIU unscheduled visit is made for the same patient. The TIU requires the provider to enter a visit before the progress note can be done, so a second visit (equals an outpatient encounter on DSS) will be made for the same stop for the same day and provider, when the ECS automated entry option is used.

(a) On DSS this does not represent a problem because:

1. All the clinic utilization for the same Social Security Number (SSN) on the same day for the same primary stop code is reported as only one encounter.

2. The products coming from the DSS clinic (CLI) extract, should be already "stats only" and the ECS products are and should be used for the only Department Cost Manager (DCM)-costed products.

(b) However, for HAS and for PCE, this required function of TIU effectively results in double counts for TIU-users in clinics sending data to PCE from ECS.

(3) Solution to the TIU Unscheduled Visit Problem

(a) **Option One.** Option one is for the VA medical center HAS to create a second, non-count HAS clinic for TIU-users to write notes for unscheduled patients. The original count clinic stop code should be used only for data coming to PCE from ECS.

(b) **Option Two.** Option two is to allow both TIU-created unscheduled visits and ECS data and/or cost visits to enter PCE as separate encounters for the same SSN, same primary stop on the same day. This requires no action by the VA medical center's HAS.

(4) **For VA Medical Centers with TIU and/or CPRS, New HAS Set-up for Simultaneous Data Entry into ECS and into TIU Progress Notes.** To enhance single-entry and sign-on functionality for VA medical centers using TIU (with CPRS and ECS data entry), the Associate Chief Information Officer (ACIO) for Technical Services' Support Team for DSS, at Albany, NY, has provided guidelines (see Att. Q) on how to set-up a menu template to help set-up a TIU - ECS-combined menu so one can go directly from entry of a TIU progress note to entry of an ECS procedure.

~~February 24, 1999~~**e. Use of DSS Identifiers**

(1) VHA is moving toward Patient Care Service Lines and provider-led practice groups or teams to provide coordinated comprehensive managed care to their team's panel of patients.

(2) DSS Identifiers are markers for VHA Ambulatory Care Production Units like Medicare Revenue Centers. DSS identifiers serve as guides to DSS outpatient department structures.

(3) This DSS Directive to capture Ambulatory Care Data, is developed in service lines sets as follows:

100 – 299	Ancillary and General Support Services
300 – 399	Medicine and Primary Care Services
400 – 449	Surgical Services
500 – 599	Mental Health Services
450 – 499 and 600 – 999	Other

f. **Method to Request New DSS Identifiers.** Work with the relevant VHA Headquarters Clinical Program Office to submit a request to the DSS Program Office at the Bedford Technical Support Office, c/o Dr. Elisabeth McSherry, M.D. and Roy Mitchell, by Microsoft (MS) Exchange, Forum E-mail, Troy E-mail, or by Fax at 781-275-5416. The request will be reviewed for technical impact, and referred to the field-based DSS Identifier Task Force for consideration and prioritization.

g. **Relationship the Veterans Health Information Systems and Technology Architecture (VISTA) HAS Stop Code Files with AAC.** Annually, all new DSS Identifier changes outlined in numbered administrative issues, are updated in HAS files and AAC edits.

3. POLICY: It is VHA policy that the procedures for the selection and management of the VHA DSS Identifier system apply to all field facilities.

4. ACTION: All HAS DSS Identifiers are to match all DSS worksheet DSS Identifiers at least in the primary position at each VA medical center. Matching in all six characters is recommended. This applies to all clinics that are "count" clinics for DSS.

a. VA medical centers and VISNs must use DSS Identifiers in a standard and consistent manner: for national VHA and network VISN comparison purposes; for ease in automating the new DSS-developed template for outpatient facility Medicare and HCFA Cost Reporting; for the current national VHA CDR; and for reliable benchmarking and outpatient contract cost predictions. *NOTE: Full adherence to the FY 2000 DSS Identifier set up instructions is expected. DSS Identifiers are updated annually.*

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(1) In FY 2000, the VA medical center HAS should ensure that the HAS DSS Identifiers for each clinic are in concurrence with the DSS Site Manager's DSS Identifiers from the DSS worksheet. This is necessary because the DSS identifier of the clinic (used by the VA medical center HAS) creates the DSS Medical Record encounter to which the DSS Identifier from the DSS worksheet must send the costed intermediate product from the DSS CLI Extract and other case resource utilization. To create the most appropriate cost products for Ambulatory Care, DSS Identifiers (from both HAS and the DSS worksheet) should match.

(2) In FY 2000, local stops 450 through 485 should only be used in the secondary stop code position for clinic reported workload that is sent to DSS as indicated on the DSS worksheet by any DSS Action Code other than #6 (not sent to DSS). This rule applies when the work is "non-count" to HAS, but "count" to DSS. In the case of a clinic set up for inpatient only, for example, where HAS considers the clinic non-count, DSS would always designate such a clinic a count clinic.

(3) The only exception is for a clinic set up to be "non-count" for both HAS and for DSS. Then local stops 450 through 485 would be permitted in the primary position.

NOTE: See Attachment J, Table F for a complete listing of all October 1, 1999, DSS Identifiers and their specific definitions.

b. Use the attachments to further enable the use of DSS Identifiers at each facility. The attachments are listed as follows:

- (1) **Attachment A.** Glossary of Acronyms.
- (2) **Attachment B.** Current Active DSS Identifiers (10/1/99) (Table A).
- (3) **Attachment C.** Summary of 10/1/99 New and Inactivated DSS Identifiers (Table B).
- (4) **Attachment D.** Existing Primary Stop Code Definition Changes (Table C).
- (5) **Attachment E.** Existing Secondary Stop Code Identification Changes (Table D).

NOTE: There is no attachment E in this FY 2000 version of the DSS Outpatient Identifiers directive.

- (6) **Attachment F.** Stop Codes 100-299 Series Including Observation (290-299).
- (7) **Attachment G.** Stop Codes 300 Series, Definitions for Primary Care Data Reporting.
- (8) **Attachment H.** Stop Code 400 Series, Ambulatory Surgery Data Reporting.

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- (9) **Attachment I.** Stop Code 500-999 Series, Mental Health and Other.
- (10) **Attachment J.** Complete Summary of October 1, 1999, Active Stop Codes (Table F).
- (11) **Attachment K.** Ancillary Stop Codes and Medical Administration Service (MAS) Exempt Stop Codes.
- (12) **Attachment L.** Telephone Stop Code List.
- (13) **Attachment M.** Always Non-Billable Decision Support System (DSS) Identifiers.
- (14) **Attachment N.** Sometimes Non-Billable Clinics with These Stops May Need to be Set Up as “Not Billable” on Medical Administration Service (MAS) Autobiller.
- (15) **Attachment O.** Fiscal Year 2000 Short Description Decision Support System (DSS) National Suffixes for Use with DSS Identifier Credit Pairs as Feeder Keys for DSS Intermediate Products.
- (16) **Attachment P.** Fiscal Year 2000 National Alpha Code Description Decision Support System (DSS) National Suffixes for Use with DSS Identifier Credit Pairs as Feeder Keys for DSS Intermediate Products.
- (17) **Attachment Q.** Event Capture and/or Text Integration Utility Menu Template.
- (18) **Attachment R.** Fiscal year 2000 Home and Community Health Care Decision Support System Structure.
- (19) **Attachment S.** Fiscal Year 2000 “Interim” Method for Contract Community Nursing Home, State Nursing Home, state Domiciliary Home, and State Hospital Care Direct Decision Support System Workload and Costs.

5. REFERENCES

- a. American Society for Testing and Materials, Standard E1384-91.
- b. National Committee for Vital and Health Statistics, Uniform Ambulatory Medical Care Minimum Data set.
- c. M-1, Part I, Chapter 16.

6. FOLLOW-UP RESPONSIBILITY: The Office of the Chief Information Officer, DSS Program Office (194) is responsible for the contents of this directive. Questions may be referred to (781) 275-9175, extension 126.

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7. RESCISSIONS: VHA Directive 99-005 and its changes are rescinded. This VHA Directive expires March 31, 2005 ~~February 24, 2004~~.

S/ by Melinda Murphy for
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Deputy Under Secretary for Health

Attachments

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ATTACHMENT A

GLOSSARY OF ACRONYMS

AAC	Austin Automation Center (Where most VHA National databases are housed.)
AAS	Austrailian Antigen Serological Test
AD	Alzheimer's Disease
ADAM	Aneurysm Detection and Management
AEP	Auditory Evoked Potential
AICS	Ambulatory Information Capture System
ALBCC	Account Level Budgeter Cost Center
AMIS	Automated Medical Information System
ANP	Advanced Nurse Practitioner
ARC	Allocation Resource Center
BOC	Budget Object Class
BROS	Blind Rehab Outpatient Specialist
BTSO	Bedford Technical Support Office
CAD	Computer Aided Design
CAM	Computerized Aided Modeling
CAT	Computer Assisted Training
CBC	Complete Blood Count
CDR	Cost Distribution Report
CFO	Chief Financial Officer
CLI	Clinic
C&P	Compensation and Pension
CMRS	Computerized Medical Record System
CNH	Community Nursing Home
CONSULT	Consultation
COS	Chief of Staff
CPRS	Clinic Patient Record System
CPT	Current Procedural Terminology
CT	Computerized Tomography
CWT	Compensated Work Therapy
DCHV	Domiciliary Care for Homeless Veterans
DCM	Department Cost Manager (production unit reporting part of DSS)
DM	Diabetes Mellitus (i.e., sugar diabetes)
DOM	Domiciliary
DSS	Decision Support System
EAP	Employee Assistance Program
ECS	Event Capture System (a generic resource utilization package in VISTA Class I software)

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EEG Electroencephalogram

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EKG	Electrocardiogram
EMG	Electromyogram
ENT	Ear, Nose, and Throat
ETT	Exercise Tolerance Test
EVAL	Evaluation
FCA	Family Centered Activities
FDR	Feeder (i.e., for DSS)
FMS	Financial Management System
FOBT	Fecal Occult Blood Test
FTE	Full-time Employee
FY	Fiscal Year
GEM	Geriatric Evaluation and Management
GI	Gastrointestinal
HAS	Health Administration Services
HBCC	Home-based Community Care
HBHC	Hospital Based Home Care
HBPC	Home Based Primary Care
HCFA	Health Care Finance Administration
HCHC	Home and Community Health Care
HCHV	Health Care for Homeless Veterans
HCMH	Homeless Chronically Mentally Ill
HIMS	Health Information Management Systems
HIV	Human Immunodeficiency Virus
HMI	Homeless Mentally Ill
HSR&D	Health Service Research and Development
HUD	Department of Housing and Urban Development
ICCM	Intensive Community Case Management
ICD-9-CM	International Classification of Disease, 9 th Edition – Clinical Modification
IPCC	Intensive Psychiatric Community Care
IV	Intravenous
KT	Kinesiotherapy
LD	Lactate Dehydrogenase (Liver Test)
LPN	Licensed Practical Nurse
MAS	Medical Administration Service
MAT	Manual Arts Therapy
MCCR	Medical Care Cost Recovery Program (also known as MCCF)
MCCF	Medical Care Cost Funding Program (also MCCR)
MD	Medical Physician

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MDS	Minimum Data Set
MH	Mental Health
MHICM	Mental Health Intensive Case Management
MRI	Magnetic Resonance Imaging
MS	Microsoft
MSDU	Medical Surgical Day Unit
NEPEC	New England Psychiatric Evaluation Center (at the VA Medical Center, West Haven, CT)
NHCU	Nursing Home Care Unit
NPC	National Patient Care
NPCD	National Patient Care Database
NOIS	National On-line Information Sharing
OOS	Occasions of Service
OP	Operation
OPC	Outpatient Clinic
OPT	Outpatient Therapy
OR	Operating Room
OT	Occupational Therapy
PA	Physician Assistant
PAI	Patient Assessment Instrument
PAP	Papanicolau Test (i.e., cervical smear cell test)
PCE	Patient Care Encounter (tracking), a VHA Ambulatory Care Vista database
PCMM	Primary Care Management Module
PCT	PTSD Clinical Team
PEC	Patient Event Capture
PET	Positron Emission Tomography
PI	Product Information
PM&RS	Physical Medicine & Rehabilitation Service
POW	Prisoner of War
PPD	Purified Protein Derivative (Tuberculosis)
PROC	Procedure
PRRTP	Psychiatric Resident Rehabilitation Treatment Program
PSI	Psychiatry
PSO	Psychology
PT	Physical Therapy
PTF	Patient Treatment File – (An AAC-based Inpatient database, also a VA medical center VISTA file).
PTSD	Post-traumatic Stress Disorder
Pub. L.	Public Law
RAD	Radiology
REHAB	Rehabilitation
RN	Registered Nurse
RPN	Registered Nurse Practitioner

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RSCH	Research
RT	Recreation Therapy
RUGS	Resource Utilization Groups
RVU	Relative Value Unit
SAS	Statistical Analysis System
SC	An Austin outpatient SAS report that lists outpatient encounters by CPT code.
SCI	Spinal Cord Injury
SDH	State Domiciliary Home
SF	An Austin outpatient SAS report that lists outpatient encounters by primary stop code and credit pair.
SHC	State Home Care
SNH	State Nursing Home
SSN	Social Security Number
STRAF	Special Therapeutic and Rehabilitation Activities Fund
TIU	Text Integration Utility (a subfunction of the VHA VISTA CMRS)
TR	Transitional Residence
U.S.C.	United States Code
VA	Department of Veterans Affairs
VACC	VA Cost Center
VASH	VA Shared Housing
VEP	Visual Evoked Potential
VERA	Veterans Equitable Resource Allocation
VHA	Veterans Health Administration
VIST	Veterans Impairment Service Team
VISTA	Veterans Health Information Systems and Technology Architecture
VISN	Veterans Integrated Systems Network
VL	Variable Labor
VISTA	Veterans Health Information Systems Technology Architecture
VISN	Veterans Integrated Systems Network

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ATTACHMENT B

CURRENT ACTIVE DSS IDENTIFIERS (10/1/99).

a. Current Table A is the list of all current Decision Support System (DSS) Identifier numbers and names. **NOTE:** See Table F for descriptions of these DSS Identifiers.

NOTE: The following symbols are used in this Attachment:

- * Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload
- ** Amended use of a DSS Identifier
- + Changed DSS Identifier description
- ++ New DSS Identifier
- ‡ Added or changed DSS Identifier CDR account
- Inactivated DSS Identifier
- ψ Work from these stop codes is always non-billable in Medical Care Cost Recovery (MCCR)

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/99)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
	101**	EMERGENCY UNIT (Use as a secondary stop code only)
102		ADMITTING/SCREENING
103 ^ψ		TELEPHONE TRIAGE
104		PULMONARY FUNCTION
105		X-Ray
106		Electrocephalogram (EEG)
107		Electrocardiogram (EKG)
	107473	ECHOCARDIOGRAM
108		LABORATORY
109		NUCLEAR MEDICINE
115		ULTRASOUND
116		RESPIRATORY THERAPY
	116329	RESPIRATORY THERAPY PROCEDURES
117		NURSING
	117473	Purified Protein Derivative (PPD) (Tuberculosis) CLINIC
	117710	FLUSHOT
118		HOME TREATMENT SERVICES
119		COMMUNITY NURSING HOME FOLLOW-UP
120		HEALTH SCREENING

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121		RESIDENTIAL CARE (NON-Mental Health (MH))
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DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
122		PUBLIC HEALTH NURSING
123		NUTRITION/DIETETICS/INDIVIDUAL
124		NUTRITION/DIETETICS/GROUP
125		SOCIAL WORK SERVICE
126		EVOKED POTENTIAL
127		TOPOGRAPHICAL BRAIN MAPPING
128		PROLONGED VIDEO-EEG MONITORING
144		RADIONUCLIDE THERAPY
145		PHARMACOLOGY/PHYSIOLOGIC NUCLEAR MYOCARDIAL PERFUSION STUDIES
146		Positron Emission Tomography (PET)
147 ^ψ		TELEPHONE/ANCILLARY
	147209 ^ψ	TELEPHONE Visual Impairment Services Team (VIST)
148 ^ψ		TELEPHONE/DIAGNOSTIC
149		RADIATION THERAPY TREATMENT
150		COMPUTERIZED TOMOGRAPHY (CT)
151		MAGNETIC RESONANCE IMAGING (MRI)
152		ANGIOGRAM CATHETERIZATION
153		INTERVENTIONAL RADIOGRAPHY
160		CLINICAL PHARMACY
165		BEREAVEMENT COUNSELING
166		CHAPLAIN SERVICE – INDIVIDUAL
167		CHAPLAIN SERVICE - GROUP
168		CHAPLAIN SERVICE - COLLATERAL
169 ^ψ		TELEPHONE/CHAPLAIN
170		Home Based Primary Care (HBPC) - PHYSICIAN
171		HBPC – Registered Nurse (RN)/Registered Nurse Practitioner (RNP)/ Physician Assistant (PA)
172		HBPC - NURSE EXTENDER
173		HBPC - SOCIAL WORKER
174		HBPC – THERAPIST
	174202++	HBPC – RECREATION THERAPY
	174205++	HBPC – PHYSICAL THERAPY
	174206++	HBPC – OCCUPATIONAL THERAPY
175		HBPC – DIETITIAN
176		HBPC - CLINICAL PHARMACIST
177		HBPC – OTHER
	177201	HBPC- Physical Medicine & Rehabilitation Service (PM&RS)
	177210	HBPC- Spinal Cord Injury (SCI)

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178 ^ψ		HBPC/TELEPHONE
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DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
179++		TELE-HOME CARE TECHNOLOGY UNIT
180		DENTAL
181 ^ψ		TELEPHONE/DENTAL
190		ADULT DAY HEALTH CARE
201		PM & RS
202		RECREATION THERAPY SERVICE
203		AUDIOLOGY
204		SPEECH PATHOLOGY
205		PHYSICAL THERAPY
206		OCCUPATIONAL THERAPY
207		PM&RS INCENTIVE THERAPY
208		PM&RS COMPENSATED WORK THERAPY (CWT)
	208466 ^ψ	Domiciliary (DOM) CWT
209+		VIST COORDINATOR
	209125	VIST COORDINATOR BY SOCIAL WORKER
210		SPINAL CORD INJURY
	210414	SCI-CYSTOURO
	210468	SCI-RN PROCEDURE
211		AMPUTATION FOLLOW-UP CLINIC
212		EMG – Electromyogram
213		PM&RS VOCATIONAL ASSISTANCE
	213466 ^ψ	Veterans (VETS) Education (ED)/Training (TRNG) DOM
214		KINESIOTHERAPY
215 [‡]		SCI HOME CARE PROGRAM
216 ^ψ		TELEPHONE Rehabilitation (REHAB) AND SUPPORT
	216203 ^ψ	TELEPHONE AUDIOLOGY REHAB SUPPORT SVC
	216204 ^ψ	TELEPHONE SPEECH REHAB SUPPORT SERVICE
	216210 ^ψ	SPINAL CORD INJURY TELEPHONE SUPPORT
217		BLIND REHAB OUTPATIENT SPECIALIST (BROS)
218		Computer Assisted Training (CAT) BLIND REHAB
290		OBSERVATION MEDICINE
291		OBSERVATION SURGERY
292		OBSERVATION PSYCHIATRY
293		OBSERVATION NEUROLOGY
294		OBSERVATION BLIND REHAB
295		OBSERVATION SPINAL CORD
296		OBSERVATION REHABILITATION
301		GENERAL INTERNAL MEDICINE

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302		ALLERGY IMMUNOLOGY
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DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
303		CARDIOLOGY
	303201	CARD REHAB
(inactivate)	303329 -	CARDIAC CATH (see new DSS ID 333)
304		DERMATOLOGY
	304416	DERM PHOTO THERAPY
305		ENDO METAB (EXCEPT DIABETES)
306		DIABETES
	306117	DIABETES EDUCATION
307		GASTROENTEROLOGY
	307117	ENTEROSTOMAL CLINIC
	307454	LIVER
308		HEMATOLOGY
309		HYPERTENSION
310		INFECTIOUS DISEASE
311		PACEMAKER
312		PULMONARY/CHEST
313		RENAL/NEPHROL(EXCEPT DIALYSIS)
	313457	TRANSPLANT
314		RHEUMATOLOGY/ARTHRITIS
315		NEUROLOGY
	315456	EPILEPSY
	315469	MOVEMENT DISORDER
	315470	SLEEP DISORDER
316		ONCOLOGY/TUMOR
	316149	Radiology (RAD) Perscription (RX) (WITH ONCOLOGY MEDICINE SERVICE)
	316329	ONCOLOGY/TUMOR PROCEDURES
317		COUMADIN CLINIC
318		GERIATRIC CLINIC
319		GERIATRIC EVALUATION AND MANAGEMENT (GEM) CLINIC
320		ALZHEIMER'S AND DEMENTIA CLINIC
321		Gastrointestinal (GI) ENDOSCOPY
322		WOMEN'S CLINIC
323		PRIMARY CARE/MEDICINE
324 ^ψ		TELEPHONE/MEDICINE
325 ^ψ		TELEPHONE/NEUROLOGY
326 ^ψ		TELEPHONE/GERIATRICS
327		MED Physician (MD) PERFORM INVASIVE Operating

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		Room (OR) Procedure (PROC)
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DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
328		MEDICAL SURGICAL DAY UNIT (MSDU)
329		MEDICAL PROCEDURE UNIT
330		CHEMOTHERAPY PROCEDURES UNIT MEDICINE
331		PRE-BED CARE Physician (MD) (MEDICAL SERVICE)
332		PRE-BED CARE RN (MEDICAL SERVICE)
333		CARDIAC CATHETERIZATION
334		CARDIAC STRESS TEST/Exercise Tolerance Test (ETT)
350		GERIATRIC PRIMARY CARE
401		GENERAL SURGERY
402		CARDIAC SURGERY
403		Ear, Nose, and Throat (ENT)
404		GYNECOLOGY
405		HAND SURGERY
406		NEUROSURGERY
407		OPHTHALMOLOGY
408		OPTOMETRY
409		ORTHOPEDICS
410		PLASTIC SURGERY
	410210	SCI PLASTIC
411		PODIATRY
412		PROCTOLOGY
413		THORACIC SURGERY
414		UROLOGY
	414451	IMPOTENCY
	414473	URODYNAMICS
415		VASCULAR SURGERY
	415461	Aneurysm Detection And Management (ADAM) CLINIC
416		AMBULATORY SURGERY EVALUATION BY NON-MD
417		PROSTHETIC, ORTHOTICS: EVALUATION, FITTING, and/or MEASURING
	417201	MAJOR MED
	417451	WHEEL CHAIR
	417452	CUSHION
	417455	SHOE/BRACE
	417473 –	ORTHOTIC LAB
	417474 –	PROSTHETICS LAB
418		AMPUTATION CLINIC

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DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
419		ANESTHESIA PRE-operation (OP) and/or POST-OP CONSULTATION
420		PAIN CLINIC
421		VASCULAR LABORATORY
422		CAST CLINIC
423		PROSTHETIC SUPPLY ORDERING SERVICES
	423461	Computer Aided Design (CAD) Computer Aided Modeling (CAM) UNIT
424 ^ψ		TELEPHONE/SURGERY
425 ^ψ		TELEPHONE/PROSTHETICS/ORTHOTICS
426		WOMEN'S SURGERY
428 ^ψ		TELEPHONE/OPTOMETRY
429		OUTPATIENT CARE IN THE OPERATING ROOM
430		CYSTO ROOM UNIT FOR OUTPATIENT
431		CHEMOTHERAPY PROCEDURES UNIT-SURGERY
432		PRE-BED CARE MD (SURGICAL SERVICE)
433		PRE-BED CARE RN (SURGERY)
435		SURGICAL PROCEDURE UNIT
	450485	Use as credit pairs only.
	450	Compensation and Pension (C&P) EXAM
	451	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	452	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	453	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	454	SPECIAL REGISTRY 5
	455	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	456	SPECIAL REGISTRY 6
	457	TRANSPLANT
	458	SPECIAL REGISTRY 7
	459	SPECIAL REGISTRY 8
	460	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	461	SPECIAL REGISTRY 1
	462	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	463	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	464	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	465	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	466	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	467	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	468	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED

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TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/99) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
	469	SPECIAL REGISTRY 2
	470	SPECIAL REGISTRY 3
	471	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	472	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	473	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	474	RESEARCH
	475	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	476	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	477	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	478	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	479	SPECIAL REGISTRY 4
	480	COMPREHENSIVE FUNDOSCOPY EXAM This DSS identifier may only be used in the credit position. It is primarily to be used with identifiers 301, 305, 306, 309, 323, 350, 407 and 408 whenever a comprehensive fundoscopic examination is performed, i.e., for patients with diabetes or hypertension; however, it may be used in conjunction with any other DSS identifier should the need arise.
	481	BRONCHOSCOPY
	429481	If Outpatient Bronchoscopy is done by Surgery in the Operating Room (OR)
	312481	If Outpatient Bronchoscopy is done in the Pulmonary Area
	327481	If Outpatient Bronchoscopy is done by Medicine in the OR
	329481	If Outpatient Bronchoscopy is done in the Medical Procedure Unit
	435481	If Outpatient Bronchoscopy is done in “Lumps and Bumps” Surgery Procedure Unit
	482	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	483	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	484	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
	485	SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED
501 -		HOMELESS MENTALLY ILL OUTREACH
502		MENTAL HEALTH CLINIC INDIVIDUAL
503		MENTAL HEALTH RESIDENTIAL CARE INDIVIDUAL
505		DAY TREATMENT - INDIVIDUAL
506		DAY HOSPITAL - INDIVIDUAL
509		PSYCHIATRY MD - INDIVIDUAL
510		PSYCHOLOGY - INDIVIDUAL

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DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
	510473 -	NEURO PSYCHOLOGY LAB
	510474 ^ψ	PSYCHOLOGY RESEARCH
	510475 -	RESEARCH (USE 510474)
	510509 -	Psychology – Psychiatry (PSO-PSI)
512		PSYCHIATRY CONSULTATION
513		SUBSTANCE ABUSE – INDIVIDUAL
	513461	INDIVIDUAL SUBSTANCE ABUSE: ALCOHOL DEPENDENCE
	513469	INDIVIDUAL SUBSTANCE ABUSE: DRUG DEPENDENCE
514		SUBSTANCE ABUSE - HOME VISIT
515 -		CWT/Transitional Residence (TR)-Homeless Chronically Mentally Ill (HCMI)
516		Post Traumatic Stress Disorder (PTSD) – GROUP
	516726	PTSD DOM-AFTERCARE GROUP
519		SUBSTANCE USE DISORDER/PTSD TEAMS
520		LONG-TERM ENHANCEMENT INDIVIDUAL
521		LONG-TERM ENHANCEMENT – GROUP
522		Department of Housing and Urban Development (HUD)-VA Shared Housing (VASH)
523		OPIOID SUBSTITUTION
524 ^ψ		ACTIVE DUTY SEX TRAUMA
525 ^ψ		WOMEN'S STRESS DISORDER TREATMENT TEAMS
527 ^ψ		TELEPHONE/GENERAL PSYCHIATRY
	527564+ ^ψ	TELEPHONE MH TEAM CASE MANAGEMENT
528 ^ψ		TELEPHONE/HOMELESS MENTALLY ILL (HMI)
529		Health Care for Homeless Veterans (HCHV)/HMI
530 ^ψ		TELEPHONE/HUD-VASH
531		MENTAL HEALTH PRIMARY CARE TEAM-INDIVIDUAL
532		PSYCHOSOCIAL REHABILITATION-INDIVIDUAL
535		MH VOCATIONAL ASSISTANCE-INDIVIDUAL
536 ^ψ		TELEPHONE/ MH VOCATIONAL ASSISTANCE
537 ^ψ		TELEPHONE/ PSYCHOSOCIAL REHABILITATION
538++		PSYCHOLOGICAL TESTING
540		PTSD ClinicalTeam (PCT) POST –TRAUMATIC STRESS- INDIVIDUAL
542 ^ψ		TELEPHONE/PTSD
545 ^ψ		TELEPHONE/SUBSTANCE ABUSE

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TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/99) (cont.)

DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
	545461 ^ψ	TELEPHONE/SUBSTANCE ABUSE-ALCOHOL DEPENDENCE
	545469 ^ψ	TELEPHONE SUBSTANCE ABUSE-DRUG DEPENDENCE
546+ ^ψ		TELEPHONE/MHICM
547		INTENSIVE SUBSTANCE ABUSE TREATMENT
	547461	INTENSIVE SUBSTANCE ABUSE TREATMENT - ALCOHOL DEPENDENCE
	547469	INTENSIVE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENCE
550		MENTAL HEALTH CLINIC (GROUP)
552+		MENTAL HEALTH INTENSIVE CASE MANAGEMENT (MHICM)
553		DAY TREATMENT – GROUP
554		DAY HOSPITAL-GROUP
557		PSYCHIATRY - GROUP
558		PSYCHOLOGY - GROUP
559		PSYCHOSOCIAL REHABILITATION - GROUP
560		SUBSTANCE ABUSE - GROUP
	560461	GROUP SUBSTANCE ABUSE: ALCOHOL DEPENDENCE
	560469	GROUP SUBSTANCE ABUSE: DRUG DEPENDENCE
561		PCT-POST TRAUMATIC STRESS – GROUP
562		PTSD – INDIVIDUAL
563+		MENTAL HEALTH PRIMARY CARE TEAM – GROUP
564+		MH TEAM CASE MANAGEMENT
573		MH INCENTIVE THERAPY-GROUP
574+		MH COMPENSATED WORK THERAPY – GROUP
	574513 -	CWT/ SUBSTANCE ABUSE
575		MH VOCATIONAL ASSISTANCE - GROUP
576		PSYCHOGERIATRIC CLINIC, INDIVIDUAL
577		PSYCHOGERIATRIC CLINIC, GROUP
578		PSYCHOGERIATRIC DAY PROGRAM
579 ^ψ		TELEPHONE/ PSYCHOGERIATRICS
580		PTSD DAY HOSPITAL
581		PTSD DAY TREATMENT
589		NON-ACTIVE DUTY SEX TRAUMA
590		COMMUNITY OUTREACH HOMELESS VETS BY STAFF
		OTHER THAN HCHV AND Domiciliary Care for Homeless Veterans (DCHV) PROGRAMS

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DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
602		CHRONIC ASSISTED HEMODIALYSIS TREATMENT HEMODIALYSIS TREATMENT
603		LIMITED SELF CARE HEMODIALYSIS TREATMENT
604		HOME/SELF HEMODIALYSIS TRAINING TREATMENT
606		CHRONIC ASSISTED PERITONEAL DIALYSIS
607		LIMITED SELF CARE PERITONEAL DIALYSIS
608		HOME/SELF PERITONEAL DIALYSIS TRAINING
610		CONTRACT DIALYSIS
611 ^ψ		TELEPHONE/DIALYSIS
650++		CONTRACT NURSING HOME DAYS
651++		STATE NURSING HOME DAYS
652++		STATE DOMICILIARY HOME DAYS
653++		STATE HOSPITAL CARE
680++		HOME/COMMUNITY HEALTHCARE ASSESSMENT
681++		VA-PAID HOME/COMMUNITY CARE PROVIDERS
682++		VA-REFERRALS TO HOME/COMMUNITY CARE PROVIDERS
	690++	TELEMEDICINE
	701711*	*USE AS CREDIT PAIRS ONLY
	701	HYPERTENSION SCREENING
	702	CHOLESTEROL SCREENING
	703	MAMMOGRAM
	704	PAP TEST
	705	FOBT - GUIAC SCREENING
	706	ALCOHOL SCREENING
	707	SMOKING CESSATION
	708	NUTRITION
	709	PHYSICAL FITNESS/EXERCISE COUNSELING
	710	INFLUENZA IMMUNIZATION
	711	INJURY COUNSEL/SEAT BELT USAGE
	712++	HEP C REGISTRY PATIENT
725		DOMICILIARY OUTREACH SERVICES
726		DOMICILIARY AFTERCARE – COMMUNITY
727		DOMICILIARY AFTERCARE - VA
728		DOMICILIARY ADMISSION SCREENING SERVICES
729 ^ψ		TELEPHONE/DOMICILIARY
730		DOMICILIARY – GENERAL CARE (Event Capture System (ECS)) USE ONLY)

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DSS* ID NUMBER	DSS* ID PAIR	DSS ID NAME
731		Psychiatric Rehabilitation Residential Treatment Program (PRRTP) – GENERAL CARE (ECS USE ONLY)
900 - Inactivate 10/1/98		SPECIAL SERVICES
999 ^ψ		EMPLOYEE HEALTH
	999510 ^ψ	PSO-Employee Assistance Program (EAP) - OPTIONAL

ATTACHMENT C

SUMMARY OF 10/1/99 NEW AND INACTIVATED DSS IDENTIFIERS

NOTE: The following symbols are used in this attachment: ** Amended use of a Decision Support System (DSS) Identifier. ^ψ Work from these stop codes is always non-billable in Medical care Cost Recovery (MCCR). Cost Distribution Report (CDR).

a. Table B New Stop Codes Added

DSS ID NUMBER	DSS ID PAIR	CDR	DESCRIPTION
	174202 ^ψ	N/A	Home-based Primary care (HBPC) RECREATION THERAPY (RT). Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establishes therapeutic program to maintain function by an HBPC RT professional.
	174205 ^ψ	N/A	HBPC PHYSICAL THERAPY (PT). Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establishes therapeutic program to maintain function by an HBPC PT professional.
	174206 ^ψ	N/A	HBPC OCCUPATIONAL THERAPY (OT). Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establishes therapeutic program to maintain function by an HBPC OT professional.
179 ^ψ		N/A	TELE-HOME CARE TECHNOLOGY UNIT. Records visits by Department of Veterans Affairs (VA) employees using tele-visual means to patients in their homes to evaluate and/or treat wound, ulcerated areas, exercise, patient appearance, advise on patient administered treatment, review pills, etc. The encounter is recorded on a permanent visual tape with electronically recorded nursing notes. Applies to those VA medical centers which have made capital investment in Tele-Home Care Technology. NOTE: For Telemedicine, use credit pair 690.
538		2311.00	PSYCHOLOGICAL TESTING. Records the individual patient encounter for psychological and/or neuropsychological assessment, using psychometric instruments or tests interpreted by a psychologist.

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Table B New Stop Codes Added (continued)

DSS ID NUMBER	DSS ID PAIR	CDR	DESCRIPTION
650 ^ψ		N/A	CONTRACT COMMUNITY NURSING HOME (CNH) DAYS. Records number of CNH days which the patient had in VA-paid, Vendor-provided CNH for that month.
651 ^ψ		N/A	STATE NURSING HOME (SNH) DAYS. Records number of SNH days which the patient had in a VA-paid State-provided SNH for that month.
652 ^ψ		N/A	STATE DOMICILIARY HOME (SDH) DAYS. Records number of SDH days which the veteran had in a VA-paid State home for that month.
653 ^ψ		N/A	STATE HOSPITAL CARE (SHC). Records information about SHC Days and other information which a veteran had in a VA-Paid State Hospital
680 ^ψ		N/A	HOME AND COMMUNITY HEALTH CARE (HCHC) ASSESSMENT. Visit by VA medical center staff to a patient at home or in a community center to provide assessment for or about vendor-provided HCHC. Specifically applies to VA staff visits to patients referred to VA-paid, vendor-provided HCHC. For VA-staff provided home care not specifically meeting criteria for stops 170-178 or 680 please use stopcode 118.
681 ^ψ		N/A	VA-paid HCHC. Records number of or days of care per month provided to a veteran by a VA-paid HCHC vendor.
682 ^ψ		N/A	VA-REFERRALS TO HCHC PROVIDERS. Records, for statistical purposes, only the VA-referrals to HCHC Services for patients seen by VA medical center staff in clinic or home settings. Should not be used to report VA medical center Full-time employee (FTE) staff time actually assessing for patients cared for by VA-paid, vendor-provided HCHC. For that work use 680.

b. New Secondary Stop Codes Added

DSS ID NUMBER	DSS ID PAIR	CDR	DESCRIPTION
	690 ^ψ	N/A	TELEMEDICINE. Records patient care provided by telemedicine consultation services. This secondary code can be attached to any primary stopcode related to the workgroup that provides telemedicine consultations (Spinal cord Injury (SCI), Dermatology, Eye, Radiology, etc.)
	712 ^ψ	N/A	Hepatitis C (HEP C) REGISTRY PATIENT. Used as a secondary. Indicates clinic care was provided for patients who had a previously confirmed HEP C diagnosis. May be used with relevant primary codes such as 307.

c. Table B Inactivated Stop Codes

DSS ID NUMBER	DSS ID PAIR	CDR	DESCRIPTION
	510473	N/A	NEUROPSYCHOLOGY LAB - Records the individual patient visit for neuropsychological assessments performed by a specially trained psychologist in neuropsychological evaluations. Assessments usually are performed in a designated lab setting. <i>NOTE: Use Psychology Testing 538.</i>
	510509	N/A	Psychology – Psychiatry (PSO-PSI)

d. Changes to CDR Account Numbers

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DESCRIPTION
215		5112.00	SCI HOME CARE PROGRAM. Records visits by VA staff to a patient's home for evaluation and/or follow-up of a SCI condition or disease. Includes physician, nursing, social work, dietetics, rehabilitation, technician, and administrative services.

ATTACHMENT D
EXISTING PRIMARY STOP CODE DEFINITION CHANGES (TABLE C)

Table C Existing PRIMARY Stop Code Definition Changes

DSS ID NUMBER	CDR	DESCRIPTION
	527564 ^ψ	TELEPHONE MENTAL HEALTH (MH) TEAM CASE MANAGEMENT. Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical, professional staff assigned to the MH Team Case Management program. Includes administrative and clinical services. <u>NOT</u> to be used for telephone contacts with the New England Program Evaluation Center (NEPEC)-supported Intensive Psychiatric Community Care (IPCC) teams. **Provisions of Title 38 U.S.C. (United States Code) Section 7332, require that records which reveal the identity, prognosis, diagnosis, or treatment of Department of Veterans Affairs (VA) patients which relate to drug abuse, alcoholism or alcohol abuse, infection with Human Immunodeficiency Virus (HIV) or sickle cell anemia, are strictly confidential and may not be released, discussed unless there is written consent from the individual.
546 ^ψ	2780.00	TELEPHONE MENTAL HEALTH INTENSIVE CASE MANAGEMENT (MHICM). Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical, professional staff assigned to the special MHICM teams (see 552). Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
552 ^ψ	5117.00	MHICM. Only VA medical centers approved to participate in MHICM (previously IPCC) programs monitored by NEPEC may use this code. This records visits with patients and/or their families or caregivers by MHICM staff at all locations including VA outpatient or MHICM satellite clinics, MHICM storefronts, MHICM offices, or home visits. Includes clinical and administrative services provided MHICM patients by MHICM staff. Additional stop codes may not be used for the same workload.
564 ^ψ	2311.00	MH TEAM CASE MANAGEMENT - Records visits with patients and/or their families or caregivers by members of a MH case management team performing MH community case management at all locations. Includes administrative and clinical services provided to patients by team members. <u>Not</u> to be used for visits by MHICM teams (see DSS Identifier #552) for case management by individuals who use other stop codes.

ATTACHMENT E

EXISTING SECONDARY STOP CODE DEFINITION CHANGES (TABLE D)

Attachment E. Existing Secondary Stop Code Identification Changes (Table D). *NOTE: There is no attachment E in this, the FY 2000 version of the Decision Support System (DSS) Outpatient Identifiers, directive; however, there may be an Attachment E in future Fiscal Year DSS Directives.*

ATTACHMENT F

STOP CODES 100 – 299 SERIES INCLUDING OBSERVATION (290-299)

1. Occasion of Service Stop Codes Ancillary List

a. **Definition.** Occasions of services are interactions with technical staff not in a medical-decision making role.

b. **Operationally.** These are stop codes which pass to the Austin Automation Center (AAC) without diagnostic coding because there is no prompt to answer International Classification of Diseases-9th Edition-Clinical Modification (ICD-9-CM) classification questions (i.e., provider name, procedure code and diagnosis code).

c. **Occasions of Service (OOS).** The following stops are always Occasions of Service (OOS), i.e., are exempt from requiring an ICD-9-CM diagnostic code. Decision Support System (DSS) Identifiers from Radiology Packages, including Nuclear Medicine, and from the Laboratory Package are passed automatically when registrations and accessions of tests are made in their respective packages. Electrocardiogram (EKG) encounters must be entered through Patient Care Encounter (PCE), Ambulatory Information Capture System (AICS), Text Integration Utility (TIU), or Appointment Management.

(1) 105 Radiology

(2) 109 Nuclear Medicine

(3) 108 Laboratory

(4) 107 EKG

NOTE: Other stop codes can be designated as OOS on the Health Administration Service (HAS) software. These include all the stop codes in the “exempt column on the Veterans Health Information Systems and Technology Architecture (VISTA) in Attachment K unless paired with a non-exempt credit pair.

2. Telephone Stop Codes. See stop code list in Attachment L for all current stop codes indicating telephone care. When these stops are used, each Department of Veterans Affairs (VA) medical center may select one of the following three current procedural terminology (CPT) codes. Do not bill telephone.

a. **99371.** Telephone call by a physician to patient or for consultation or medical management or for coordinating medical management with other health care professionals, (e.g., Nurses, therapists, social workers, nutritionists, physicians, pharmacists); simple or brief, (e.g., to report on tests and/or laboratory results, to clarify or alter previous instructions,

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to integrate new information from other health professionals into the medical treatment plan, or to adjust therapy).

b. **99372.** Intermediate (e.g., to provide advice to an established patient on a new problem, to initiate therapy that can be handled by telephone, to discuss test results in detail, to coordinate medical management of a new problem in an established patient, to discuss and evaluate new information and details, or to initiate new plan of care).

c. **99373.** Complex or lengthy (e.g., lengthy counseling session with anxious or distraught patient, detailed or prolonged discussion with family members regarding seriously ill patient, lengthy communication necessary to coordinate complex services of several different health professionals working on different aspects of the total patient care plan).

3. Home Based Primary Care (HBPC)

***NOTE:** The phrase HBPC has been updated from hospital-based home care (HBHC) to HBPC. Each VA medical center should ensure the name is changed (reference Veterans Health Administration (VHA) Directive 96-051).*

DSS ID NUMBER	CDR ACCT	DSS ID NAME	DESCRIPTION
170	N/A	HBPC - PHYSICIAN	HBPC. Records evaluations, treatment orders, and follow-up for patients in HBPC, etc.
171	N/A	HBPC – Registered Nurse (RN), Registered Nurse Practitioner (RNP), Physician Assistant (PA)	HBPC. Records initial and continued assessment; teaching patient and caregiver; monitoring patient's condition, supervising Licensed Practical Nurse (LPN)s and Home Health Technician; functioning in expanded nursing role; providing care management and coordination of primary care.
172	N/A	HBPC - NURSE EXTENDER	HBPC. Records monitoring observation of physical, nutritional and psychological status; reinforcing rehabilitation measures; demonstrating and teaching use of therapeutic and rehabilitative devices; providing nursing procedures and personal care.
173	N/A	HBPC - SOCIAL WORKER	HBPC. Records initial and continued assessment of patient and caregiver of interpersonal resources, psychosocial functioning, support system; provides psychosocial treatment including individual and family counseling.

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DSS ID NUMBER	CDR ACCT	DSS ID NAME	DESCRIPTION
174	N/A	HBPC - THERAPIST	HBPC. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establishes therapeutic program to maintain function.
175	N/A	HBPC - DIETITIAN	HBPC. Records assessment of patient's nutritional status, assess adequacy of caregiver's capacity to prepare recommended meals; training of caregiver in efficient ways of managing identified nutritional problems.
176	N/A	HBPC - CLINICAL PHARMACIST	HBPC. Records assessment and monitoring of drug therapy; identifies patient - specific medication issues; educates patient and caregiver about proper use of medications.
177	N/A	HBPC - OTHER	HBPC. Records professional, home health aide and other services provided.
		HBPC-Physical Medicine and Rehabilitation Service (PM&RS)	
		HBPC-Spinal Cord Injury (SCI)	
178	2780	HBPC TELEPHONE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to HBPC service. Includes administrative and clinical services. **Provisions of Title 38 United States Code (U.S.C.) Section 7332 which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, infection with Human Immunodeficiency Virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

** Amended use of a DSS ID

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DSS ID NUMBER	CDR ACCT	DSS ID NAME	DESCRIPTION
179	N/A	TELE-HOME CARE TECHNOLOGY UNIT	Records visits by VA employees using tele-visual means to patients in their homes to evaluate and/or treat wound, ulcerated areas, exercise, patient appearance, advise on patient administered treatment, review pills, etc. The encounter is recorded on a permanent visual tape with electronically recorded nursing notes. Applies to those VA medical centers which have made capital investment in Tele-Home Care Technology. NOTE: <i>For Telemedicine, use credit pair 690.</i>

4. Observation Reporting. Observation reporting is a specially defined type of extended outpatient care (see 1999 Observation Current Procedural Terminology (CPT) code definition).

5. Use Observation DSS Identification (ID) Codes in the Outpatient Setting

a. Observation Data Reporting

(1)- Criteria. Observation cases must meet the criteria set up by Health Care Finance Administration (HCFA) (Medicare) and by the 1999 CPT code criteria.

(2) Background

(a) In Fiscal Year (FY) 1997, it was shown through the results of the FY 1997 National Stop Code Usage Survey that Observation cases were found to be reported in no consistent manner between sites, over a wide range of DSS Identifiers. In FY 1997, these observation cases were reported both in the Medicine and Surgery series as well as in the Admit/Screening (102-101); Medical Surgical Day Unit (MSDU) (328); and Ambulatory Care work units. For FY 1998, seven Observation stop codes were created, specifically for Observation-only work (290-296).

(b) In FY 1998 (since October 1, 1997), most VA medical centers have followed the Observation stop code guides in Directive 96-057, Change 3. This permits clear identification of all Observation work without negatively impacting the Cost Distribution Report (CDR), DSS, Performance Measures and Medical Care Cost Recovery (MCCR). However, about 2 years ago, to compensate for the VISTA Dietetics and Unit Dose drug packages, which did not serve outpatients at that time, (as a type "software workaround"), a proposed "Observation Directive" (VHA Directive 98-025) was developed for consideration. Due to concerns with that directive, it is currently under review and study. This inpatient Observation Directive guided VA medical centers to admit Observation patients to one of seven new Observation treating specialties in the Patient Treatment File (PTF), thus requiring for each Observation stay, a discharge summary. Since this directive makes Revenue Modeling and coding of patients not possible on DSS or other revenue modeling systems, it is recommended that for FY 2000, VA medical centers continue their FY 1998 practice for Observation patients of

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using the seven observation stop codes; for FY 2000, these DSS identifiers will continue to be available.

(c) For use in- FY 1998 and thereafter, the National FY 1998 Stop Code Sub-Task Force on Observation Care Reporting, developed the seven Observation Stop Codes (290 through 296) to uniformly report observation care by providing clinical service. These have been available and used by most VA medical centers for the entire FY 1998. This is especially important for those VA medical centers who have major hardship using any PTF admissions for Observation Care.

b. **Action.** As a major principle, all Observation Care that is to be designated by the VA medical center for outpatient stop code reporting should be reported only by one of the seven outpatient Observation stop codes, in the primary position, with the appropriate CPT and International Classification of Disease, 9th edition-Clinical Modification (ICD-9-CM) codes.

(1) The current HCFA and CPT code definitions of Observation care applies to the use of these seven new Observation stop codes and to the use of the standard Observation CPT codes. Credit pairs describing the work unit producing the observation work can be used.

(2) For Observation Care that meets HCFA and CPT code criteria, only seven Observation stop codes should be used:

- 290 – Observation Medicine
- 291 – Observation Surgery
- 292 – Observation Psychiatry
- 293 – Observation Neurology
- 294 – Observation Blind Rehab
- 295 – Observation Spinal Cord
- 296 – Observation Rehabilitation

NOTE: From FY 1998 onward, no stop code should be used in the primary position for Observation Care other than one of these seven "Observation –Only" stop codes.

6. New Stop Codes in FY 2000 in the 100-299 Series

179 TELE-HOME CARE TECHNOLOGY UNIT

7. New Stop Code Pairs for FY 2000 in the 100-299 series

174202 HBPC RECREATION THERAPY
 174205 HBPC PHYSICAL THERAPY
 174206 HBPC OCCUPATIONAL THERAPY

ATTACHMENT G

**STOP CODES 300 SERIES
DEFINITIONS FOR PRIMARY CARE DATA REPORTING**

1. Definitions. The term “Primary Care” has caused considerable confusion in the Department of Veterans Affairs (VA) in relation to stop codes and workload definitions. There are four operational meanings of Primary Care in the Veterans Health Administration (VHA) which represent very distinct functionalities.

a. **Primary Care as a Service Line of the Medical Center.** Primary Care as a Service Line of the Medical Center, like the Medical-Surgical, Mental Health, and Extended Care (Long-term Care) Service Lines.

b. **Primary Care as a Clinical Service Product (Intermediate Product).** Primary Care as a Clinical Service Product (Intermediate Product), i.e., a set of prevention or annual physical or other care products needing to be tracked by enrollee for performance measures.

c. **Primary Care as a Form of Health Care Practice or Specialty.** Primary Care as a form of health care practice or specialty for medical physicians (M.Ds), Physician Assistants (PAs) and Nurse Practitioners. In VHA outpatient areas, these workers are represented by stop code designated, Decision Support System (DSS) production units.

d. **Primary Care as a Managed Care Version of Case Manager.** Primary Care as a managed care version of case manager (case management) where every Primary Care Patient is assigned to a Primary Care Team and a Primary Care Provider, i.e., a patient with a chronic heart disease is assigned to a cardiologist as “primary care physician” and that patient, from then on, becomes part of this specialist’s primary care panel. It is critical to use the VHA’s Veterans Health Information Systems and Technology Architecture (VISTA) Primary Care Management Module (PCMM) package to keep track of VHA enrollees and/or physician. PCMM will be used to extract the population for the Primary Care Enrollment performance measure in Fiscal Year (FY) 99.

***NOTE:** Although DSS data can be used to gain information about all four of these Primary Care entities, DSS Identifiers (stop codes) are related only to subparagraphs 1b and 1c.*

2. Recommended Codes for Primary Care Reporting. DSS Identifiers are used to define work areas or production units for clinicians who are specialized in the practice of Primary Care (e.g., DSS Identifiers 323 and 350), (see subpar. 1c). DSS Identifiers are also used to describe the stable, cost products provided to patients, that constitute primary care services (see subpar. 1b).

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a. Primary DSS Identifiers for Primary Care

(1) The VHA stop codes in the primary position that relate to primary care work (or production) units and primary care products are:

- (a) 323 - Primary Care-Medicine
- (b) 322 - Women's Clinic
- (c) 350 - Primary Care-Geriatrics
- (d) 531 - Mental Health Primary Care Team-Individual
- (e) 563 - Mental Health Primary Care Team-Group
- (f) 170177 - Home Based Primary Care (HBPC)

b. **Secondary DSS Identifiers for Primary Care.** For medical specialty clinics that also provide primary care products, 323 can be appended as a secondary code in the six character DSS Identifier to indicate the clinic in that specialty that provides specifically primary care services (e.g., 303-323 for cardiologist's clinic providing primary care.)

3. Information on Selection of Performance Measure Subsets Using Primary and Secondary DSS Identifiers for Primary Care

a. There are two databases being used to extract Primary Care Performance Measure data:

(1) The PCMM module mentioned for enrollment, (see VHA Directive 98-023 for details); and

(2) DSS Identifiers in the National Patient Care Database (NPCD) related to Primary Care for sample selections for customer satisfaction, and for some other measurements.

b. The DSS Identifiers used in defining Performance Measure data sets should reflect where primary care products are provided. The primary care products are determined by using the Primary Care-defined DSS Identifiers (323, 322, 350, 531, 563). These codes may be in the primary or secondary position in the clinic setup.

c. If the set of products desired is only for physician workload versus some other clinician, the secondary code should be reviewed. If a secondary code is present, other than a local stop, this indicates that a non-physician provided the primary care services. Another method to check for physician as provider, is to review the value for the "practitioner-type" reported on the local Patient Care Encounter (PCE), or on NPCD, for the encounter and to determine if that value is in the range of physician practitioners.

(1) Use of the secondary credit pair to designate primary care teams is preferred because it enables sites to set-up separate DSS departments for each primary care team more easily using FDR KEY (six character DSS Identifier).

(2) However, many sites prefer to use the alpha codes for the DSS designators for primary care teams' DSS intermediate products. The caveats here are:

(a) In setting up DSS feeder keys or products, be careful to do so by examination of the entire feeder key, specifically the last five characters.

(b) Be sure to use the DSS suffix as "ATEM, BTEM, etc." that have the alpha character that identifies the team in the first (not fourth) position. In DSS, sometimes the fourth position does not show up so clear identification of the teams product could be difficult if the alpha designator is not in the first position.

4. Guidelines for Primary Care Team Area Stop Code Use: Using DSS Identifiers for DSS Primary Care Departments and for DSS Intermediate Products

To designate a Primary Care team with DSS identifiers, two approaches are feasible:

a. Recommendations were made in DSS to code the Primary Care Teams using the credit pairs: local codes, such as, Special Registry 1 (461) or Special Registry 2 (469) to designate Team 1, Team 2, etc. or the blue team or the gold team, etc. See the following example:

Primary Code	Secondary Code	National Alpha Code	Description
323	461	NURS	Nurse run clinic for the Primary Care Team 1 or the blue team.
323	469	NURS	Nurse run clinic for the Primary Care Team 2 or the gold team.
323	461	SOCW	Social work run clinic for the Team 1 or the Primary Care blue team.
323	461	RESI	Resident run clinic for the Primary Care Team 1 or the blue team.

b. Historically, when DSS was implemented, a third identification code-(4 character Alpha code) was added to the primary and secondary stop codes. A national 4-character Alpha code list for use with the DSS stop code worksheet VISTA functionality was distributed with the DSS VISTA software and is updated occasionally (see current list in Att. O). This allowed an additional level on which to try to identify clinic work products for DSS costing. Thus alternatively, for DSS products only, a site can select to use the National Alpha codes, such as, ATEM or BTEM, to designate the primary teams. See following example:

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Primary Code	Secondary Code	National Alpha Code	Description
323	117	ATEM	Nurse run clinic for the Primary Care blue team.
323		ATEM	Physician run clinic for the Primary Care blue team.
323	125	BTEM	Social work run clinic for the Primary Care gold team.
323	461	NURS	Nurse run clinic for the Primary Care Team 1 or the blue team.
323	469	NURS	Nurse run clinic for the Primary Care Team 2 or the gold team.
323	461	SOCW	Social work run clinic for the Team 1 or the Primary Care blue team.
323	461	RESI	Resident run clinic for the Primary Care Team 1 or the blue team.
323	461	NURS	Nurse run clinic for the Primary Care Team 1 or the blue team.
323	469	NURS	Nurse run clinic for the Primary Care Team 2 or the gold team.
323	461	SOCW	Social work run clinic for the Team 1 or the Primary Care blue team.
323	461	RESI	Resident run clinic for the Primary Care Team 1 or the blue team.

c. Other primary care done in a specialty clinic would be designated with the 323 as a credit pair to the specialty clinic; see the following example:

Primary Code	Secondary Code	National Alpha Code	Description
303	323		Cardiologist run clinic providing primary care.

NOTE: This second option does not help the site determine primary care team work units by stop code at local VA medical center or on Austin Automation Center (AAC) Statistical Analysis System (SAS) Outpatient Clinic (OPC) file.

ATTACHMENT H

STOP CODE 400 SERIES, AMBULATORY SURGERY DATA REPORTING

1. Ambulatory Surgery Data Reporting in Three Specific Components

a. In Fiscal Year (FY) 1999, based on a National Decision Support System (DSS) Stop Code Use 1999 Survey, the following general guidelines were developed for the Veterans Health Administration (VHA) Ambulatory Surgery Reporting. Specific code definitions can be found in Attachment J, Table F.

(1) The Ambulatory Surgery process can be composed of three steps (or those specific components): preparation for surgery, surgery, and post-operative care.

(2) The choice of which code to use will be determined by three factors:

(a) Whether the surgery is performed in an Operating Room (OR) or specialty procedure unit,

(b) What types of procedures are done, and

(c) What type of physician is performing the surgery.

NOTE: Using code 117 – Nursing is a local decision, but if it is used, it should be confined to a credit pair.

b. Preparation for Surgery

(1) A good choice of codes to document pre-operative work would be the codes **416** – Ambulatory Surgery Evaluation by Non-MD and/or **419** – Anesthesia Pre-Operation (OP) and/or Post- Operation Consultation (Pre-OP/Post-OP Consult). These codes can be adapted to be used the same day of surgery or days in advance.

(2) The following codes should only be used for pre-operative work done prior to a hospital admission, not for outpatient Ambulatory Surgery. The codes are; **331**- Pre-Bed Care MD (Medical Service), **332**- Pre-Bed Care RN (Medical Service), **432**- Pre-Bed Care MD (Surgical Service) And **433** – Pre-Bed Care RN (Surgery).

c. OR

(1) Code **429** – Outpatient Care in the OR - should be used for the majority of procedures done by surgeons in an OR.

(2) Code **327** – Medical Physician Performing Invasive OR Procedure is - also available to record procedures if done by a medical physician as the primary operator in an OR. **NOTE:** Both these codes include room preparation, OR services and post-operative recovery room time. Either can be set up as separate locations to be used for automatic data transfer from the

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Surgery package, and the code (429 or 327) should be in the primary stop code position.

d. **Other (Non-OR) Invasive Procedure Units.** There are several codes available to define specific (Non-OR) invasive procedure units. If procedures are done in a unit or suite, these codes should be in the primary stop code position.

(1) Codes include: **321**- GI Endoscopy, **330** – Chemotherapy Procedures Unit (Medicine), **333** – Cardiac Catheterization, **334**- Cardiac Stress Test/Exercise Tolerance Test (ETT), **329** – Medical Procedure Unit, **430** – Cysto Room Unit For Outpatient, **431** – Chemotherapy Procedures Unit (Surgery), **435** – Surgical Procedure Unit. **NOTE:** *It is also appropriate to use these codes as a secondary stop code if site wishes to document invasive procedures done in other areas. This may be necessary if the site does not have specialty units established, and performs procedures in regular clinic areas.*

(2) Codes **480** – Fundoscopy and **481** – Bronchoscopy are only to be used in the secondary position.

e. Post-Operative Care

(1) Two codes which are available for specific post-operative care are: Code **419** – Anesthesia Pre-OP/Post-OP Consult and Code **328** – Medical and/or Surgical Day Unit (MSDU). These codes are used for Anesthesia Follow-up (419) and for some post-operative nurse care if the patient was followed in the Medical Surgical Day Unit (328).

(2) Codes **429** – Outpatient Care in the OR, and **327** – Medical MD Performing Invasive OR Procedure - do include recovery room time and, therefore, may not need an additional clinic visit.

f. Unscheduled Procedures

(1) VHA has a national outpatient database for which the DSS Identifier known as Primary and Secondary Stop Code Pair performs a service identifying the type of clinical work department providing care. For this reason, sites are encouraged to use these codes not only for scheduled procedures, but also for unscheduled procedures. Clinics should be available to record procedures performed in suites or units as well as other clinic areas where invasive procedures are performed.

(2) If an unscheduled procedure becomes necessary during a regular clinic visit, the Unscheduled Visit feature of the Scheduling package should be used to record a visit in such a clinic. **NOTE:** *This only applies if the procedure does not pass to Patient Care Encounter (PCE) by a link established in the non-OR component of the Surgery package.* Documenting procedures in this way will give DSS unique products and give a fuller picture for standardization purposes. **NOTE:** *The workload may also be reflected on the site's Cost Distribution Report. These benefits cannot be achieved through Current Procedural Terminology (CPT) coding alone.*

g. **Examples of Non-OR Coding Possibilities**

NON-OR PROCEDURES	DSS ID	DESCRIPTION
BRONCHOSCOPY	312481	Bronchoscopy done in Pulmonary clinic
BRONCHOSCOPY	329481	Bronchoscopy done in medical procedure unit
DERM BIOPSIES	304329	Biopsies done in Dermatology clinic
FUNDOSCOPY	306480	Fundoscopy exam done in Diabetes Clinic
FUNDOSCOPY	407480	Fundoscopy exam done in Ophthalmology Clinic
GI ENDOSCOPY	307321	Endoscopy done in Gastroenterology clinic
GI ENDOSCOPY	321	Endoscopy done in Endoscopy suite
LIVER BIOPSIES	307329	Biopsies done in a Gastroenterology clinic
LIVER BIOPSIES	435307	Biopsies done in Non-OR suite by Surgery
RENAL BIOPSIES	313329	Biopsies done in a Renal Clinic

2. **General and Sub-Specialty Surgical DSS Identifiers**

a. **General Surgery**

401 – General Surgery

b. **Sub-Specialty Identifiers**

402 – Cardiac Surgery

403 – Ear, Nose, and Throat (ENT)

404 – Gynecology

405 – Hand Surgery

406 – Neurosurgery

407 – Ophthalmology

408 – Optometry

409 – Orthopedics

410 – Plastic Surgery

411 – Podiatry

412 – Proctology

413 – Thoracic Surgery

414 – Urology

415 – Vascular Surgery

417 – Prosthetic, Orthotics: Evaluation, Fitting, and/or Measuring

423 – Prosthetic Supply Ordering

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3. Ambulatory Surgery Identifiers

a. Pre-Op

416 – Ambulatory Surgery Evaluation by other than MD

419 – Anesthesia Pre-op and/or Post-op Consult

b. Operation

429 – Ambulatory Surgery OR or Regular OR

430 – Cysto Room for Outpatients

c. Other Non-OR Invasive

431 – Chemotherapy Procedures Unit

435 – Surgical Procedure Unit

d. Pre-Hospital Admissions Work

432 – Pre-bed Care by Surgical Physician

433 – Pre-bed Care by Nurse

4. Surgical Clinic, Laboratory, and Special Exam Identifiers

418 – Amputation Clinic

420 – Pain Clinic

421 – Vascular Laboratory

422 – Cast Clinic

424 – Telephone Clinic and/or Surgery

425 – Telephone Clinic and/or Prosthetics-Orthotics

426 – Women's Surgical Clinic

428 – Telephone Clinic and/or Optometry

480 – Comprehensive Fundoscopy Exam

5. Mandatory Identifier Pairs

410-210 – Spinal Cord injury (SCI) Plastic Surgery

414-451 – Impotency Clinic

414-473 – Urodynamics Clinic

415-461 – Aneurysm Detection and Management (ADAM) Clinic

417-201 – Major Medical and/or Prosthetics-Orthotics

417-451 – Wheelchair

417-452 – Cushion

417-455 – Shoe and/or Brace

417-473 – Orthotic Lab

423-461 – Cad Cam Unit

423-473 – Prosthetic Laboratory

* -450 – Compensation and Pension (C&P) Exams

* -481 – Bronchoscopy

321481 If outpatient Bronchoscopy done in Endoscopy Room

327481 If outpatient Bronchoscopy done in the OR by Medicine

329481 If outpatient Bronchoscopy done in the Ambulatory Procedures Unit

429481 If outpatient Bronchoscopy done by Surgery in the OR

438481 If outpatient Bronchoscopy done in “Lumps and Bumps” Surgery
Procedure Unit

* Represents the service or sub specialty clinic doing the exam, i.e., 315-450 for Neurology C&P or 401 and/or 450 for General Surgery C&P

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ATTACHMENT I

STOP CODE 500-999 SERIES, MENTAL HEALTH AND OTHER

1. Changes in Mental Health Codes Fiscal Year (FY) 2000

a. **New Primary Decision Support System (DSS) Identifiers** (with Cost Distribution Report (CDR) account number, and the DSS Identification (ID) name).

DSS ID NUMBER	CDR ACCT	DSS ID NAME	DESCRIPTION
538	2311.00	Psychological Testing	Records the individual patient encounter for psychological and/or neuropsychological assessment, using psychometric instruments or tests interpreted by a psychologist.
650	N/A	Community Nursing Home Days	Records number of Community Nursing Home (CNH) days which the patient had in Department of Veterans Affairs (VA)-paid, Vendor-provided CNH for that month.
651	N/A	State Nursing Home Days	Records number of State Nursing Home (SNH) days which the patient had in a VA- paid, State Provided SNH for that month.
652	N/A	State Domiciliary Home Days	Records number of State Domiciliary Home (SDH) days which the veteran had in a VA- paid, State home for that month.
653	N/A	State Hospital Care	Records information about State Hospital Care (SHC) Days and other information which a veteran had in a VA- paid State Hospital
680	N/A	Home Community Health Care Assessment	Visit by VA medical center staff to a patient at home or in a community center to provide assessment for or about vendor-provided HCHC. Specifically applies to VA staff visits to patients referred to VA-paid, vendor-provided HCHC. For VA-staff provided home care not specifically meeting criteria for stops 170-178 or 680. Use stop code 118.
681	N/A	VA-paid Home Community Health Care	Records number of or days of care per month provided to a veteran by a VA-paid HCHC vendor.
682	N/A	VA-Referrals to Home Community Health Care Providers	Records for statistics only the VA-referrals for HCHC Services of patients seen by VA medical center staff in clinic or home settings. Should not be used to report VA medical center full-time employee (FTE) staff time actually assessing for patients cared for by VA-paid, vendor-provided HCHC. For that work use 680.

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b. Definition Changes

(1) Definition changes have occurred in the following primary stop codes: 546; 552; 564; (see Att. J, Table F).

(2) Definition changes have occurred in the following credit pair: 527564

d. Inactive Codes

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME □	DESCRIPTION
	510473	N/A	NEURO-PSYCHOLOGY LAB	Records the individual patient visit for the purpose of neuropsychological assessments performed by a specially trained psychologist in neuropsychological evaluations. Assessments usually are performed in a designated laboratory setting. <i>NOTE: Use Psychology Testing 538.</i>
	510509	N/A	Psychology-Psychiatry (PSO-PSI)	

2. Distinctions between Care in the Mental Health Day Hospital and in the Mental Health Day Treatment Center

a. The VA has two programs intended to provide special support to mental health patients to avoid hospitalization.

(1) **Day Hospital.** Day Hospital is a specific acute episode program that is intended to help prevent repeat hospitalizations due to exacerbating mental illness. If a patient has been stable on the outside, but suddenly becomes hallucinatory and uncontrolled on current medications, that patient may be referred to the Day Hospital. It is meant to be used to prevent hospitalization in acute crisis or exacerbations only. Usually patients are not assigned to Mental Health Day Hospital for more than 3-week episodes.

(2) **Day Treatment.** Day Treatment is chronic Mental Health caregiving for outpatients. This is intended to be used for long-term conditions needing support to maintain care or well-being on the outpatient side only.

b. In Fiscal Year (FY) 1999, the hours and days for the two programs Day Hospital and Day Treatment were changed to match and to more realistically reflect programs 4 to 8 hours per day, 3 to 7 days per week.

(a) Purpose. The major distinction is that Day Treatment is long-term for continuing care and community maintenance. Day Hospital clinics are prioritized for crisis treatment, transitional care and rehabilitation.

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(b) Duration. Duration of episode of treatment typically on average, do not extend beyond 3 to 4 weeks per client per acute episode in a Day Hospital Clinic, unlike Day Treatment care which is expected to go on for months or years.

3. Sexual Trauma Counseling

a. **Stop Code 524 – ACTIVE DUTY SEX TRAUMA COUNSELING.** Stop Code 524 is to be used when providing counseling to any veteran who received this type of trauma while on active military duty. These patients may or may not have had sexual trauma as children or before and/or after active duty. If any sexual trauma occurred during active military duty, this DSS Identifier (524) should be used.

b. **Stop Code 589 – NON-ACTIVE DUTY SEX TRAUMA COUNSELING.** Stop Code 589 should be used for patients who have received sexual trauma at some time, but not during active military duty. If it occurred during active military duty, stop code 524 must be used (see Public Law (Pub. L.) 102-585).

4. Categorization of all Mental Health and Domiciliary (DOM) Stop Codes

a. **Psychiatry (MD)**

509 Psychiatry MD (Individual)

512 Psychiatry Consultation

557 Psychiatry Group

b. **Mental Health**

502 Mental Health Clinic (Individual)

550 Mental Health Clinic (Group)

535 Mental Health Vocational Assistance (Individual)

573 Mental Health Incentive Therapy (Group)

574 Mental Health Compensated Work Therapy (CWT) (Group)

575 Mental Health Vocational Assistance (Group)

c. **Psychology**

510 Psychology (Individual)

510473 Neuropsychology Lab

510474 Psychology Research

510509 Psychology – Psychiatry (PSO-PSI)

558 Psychology (Group)

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d. Special Programs

529 Health Care for Homeless Veterans (HCHV)/Homeless Mentally Ill (HMI)
522 Department of Housing and Urban Development (HUD) – VA Shared Housing (VASH)
523 Opioid Substitute
540 Post Traumatic Stress Disorder (PTSD) PTSD Clinical Team (PCT) –PTSD (Individual)
561 PCT-PTSD (Group)
577 Psychogeriatric Clinic (Group)
576 Psychogeriatric Clinic (Individual)
559 Psychosocial Rehabilitation (Group)
532 Psychosocial Rehabilitation (Individual)
516 PTSD (Group)
562 PTSD (Individual)
516-726 PTSD DOM Aftercare (Group)
524 Active Duty Sexual Trauma
560 Substance Abuse (Group)
513 Substance Abuse (Individual)
513461 Substance Abuse: Alcohol Dependence (Individual)
513469 Substance Abuse: Drug Dependence (Individual)
560461 Substance Abuse: Alcohol Dependence (Group)
560469 Substance Abuse: Drug Dependence (Group)
519 Substance Use Disorder/PTSD Teams
525 Women’s Stress Disorder Treatment Teams
589 Non-Active Duty Sexual Trauma

e. Telephone

527 Telephone General Psychiatry
527564 Telephone Intensive Community Case Management (ICCM)
528 Telephone HMI
530 Telephone HUD-VASH
536 Telephone Mental Health Vocational
537 Telephone Psychosocial Rehabilitation
542 Telephone PTSD
545 Telephone Substance Abuse
545461 Telephone Substance Abuse Treatment-Alcohol Dependence
545469 Telephone Substance Abuse Treatment-Drug Dependence
546 Telephone-Mental Health Intensive Case Management (MHICM)
579 Telephone Psychogeriatrics

f. Off Station

503 Mental Health Residential Care (Individual)
514 Substance Abuse Home Visit
520 Long-term Enhancement
521 Long-term Enhancement (Group)

552 Intensive Psychiatric Community Care (IPCC) Community Visit
564 ICCM
590 Community Outreach to Homeless Vets by Staff other than HCHV and Domiciliary Care
for Homeless Veterans (DCHV) programs

g. Day Programs

505 Day Treatment (Individual)
506 Day Hospital (Individual)
547 Intensive Substance Abuse Treatment
547461 Intensive Substance Abuse Treatment-Alcohol Dependence
547469 Intensive Substance Abuse Treatment-Drug Dependence
553 Day Treatment (Group)
554 Day Hospital (Group)
578 Psychogeriatric Day Program
580 PTSD Day Hospital
581 PTSD Day Treatment

h. Primary Care

531 Mental Health Primary Care Team (Individual)
563 Mental Health Primary Care Team (Group)

i. Other

725 DOM Outreach
726 DOM Aftercare Community
727 DOM Aftercare VA
728 DOM Admission Screening Services
729 Telephone Domiciliary
730 Domiciliary-General Care
731 Psychiatric Residential Rehabilitation Treatment Program (PRRTP)-General Care

ATTACHMENT J

COMPLETE SUMMARY OF OCTOBER 1, 1999, ACTIVE STOP CODES

a. The complete changes and updates and current status of October 1, 1999, Decision Support System (DSS) Identifiers, their short and long definitions, follows in **Table F**.

b. The following symbols are used throughout Table F:

* Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload

** Amended use of a DSS Identifier

+ Changed DSS Identifier description

++ New DSS Identifier

‡ Added or changed DSS Identifier Cost Distribution Report account

- Inactivated DSS ID

ψ Work from these stop codes is always Non-Billable in Medical Care Cost Recovery (MCCR)

TABLE F, Fiscal Year (FY) 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID* NUMBER	DSS □ ID PAIR	CDR ACCT	DSS ID* NAME □	DESCRIPTION
	101** (Secondary Stop Code only)	2111.00	EMERGENCY UNIT	Includes all activities involved in the evaluation and screening of patients in an emergency and/or stretcher room. This includes administrative, physician, nursing, and ancillary services. Use as a secondary stop only.
102		2111.00	ADMITTING/ SCREENING	Includes all clinical activities involved in the evaluation, screening and treatment of patients in an emergency, urgent care, triage, stretcher room. Also includes activities involved in the admitting and/or screening process of patients applying for medical care. Includes administrative, physician, nursing, and technician services. To be used in first (stop code) position in profile setup.

TABLE F, Fiscal Year (FY) 2000 Outpatient DSS Identifier Definitions (Effective on Veterans Health Information Systems Technology Architecture (VISTA) Software)

DSS ID* NUMBER	DSS □ ID PAIR	CDR ACCT	DSS ID* NAME □	DESCRIPTION
103 ^ψ		2780.00	TELEPHONE TRIAGE	Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of Title 38 United States Code (U.S.C.) Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of Department of Veterans Affairs (VA) patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with human immunodeficiency virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
104		2612.00	PULMONARY FUNCTION	Records patient visit for the performance of a diagnostic pulmonary function study and/or treatment. Includes the services of a therapist and/or a technician, physician services and interpretation, and administrative services.
105		2612.00	X-RAY	Records patient visit for the performance of diagnostic, routine radiograms; e.g., chest, ankle, spine, tibia, elbow, etc. Includes technician services, physician services and interpretation, and administrative services.
106		2612.00	EEG	Records patient visit for the performance of an electroencephalogram (EEG). Includes technician services, physician services and interpretation, and administrative services.
107		2612.00	EKG	Records patient visit for the performance of an electrocardiogram (EKG). Includes technician services, physician services and interpretation, and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
	107473		ECHO	Indicates patient visits for the performance of an ECHO cardiac study. Includes technician services, physician services and interpretation, and administrative services.
108		2612.00	LABORATORY	Records patient visit for the performance of diagnostic testing; e.g., blood serum, urine, sputum, tissue, etc. Includes technologist services, physician services and interpretation, and administrative services. Includes chemistry, cytology, microbiology, pathology, etc.
109		2612.00	NUCLEAR MEDICINE	Records patient visit for the performance of nuclear diagnostic procedures. Procedures include bone scan, liver scan, thyroid scan, brain scan, etc. Includes technician services, physician services and interpretation, and administrative services.
115		2612.00	ULTRASOUND	Records patient visit for the performance of ultrasonic diagnostic procedures (sonograms). Includes technician services, services and interpretation, and administrative services.
116		2110.00	RESPIRATORY THERAPY	Records patient visit for Respiratory Therapy services, including treatment and/or education in use of treatment modalities. (Use code 312 for other pulmonary care.)
117		2610.00	NURSING	Includes assessment, evaluation, education, treatment services provided by Registered Nurse (R.N.) or Advanced Nurse Practitioner (ANP) in Nurse Administered clinics. Can be used as first (stop code) or secondary (credit stop) position in clinic setup. Should be second stop code in all Nurse-run work units for team work such as Primary Care (323) and Mental Health (502).
	117473		PPD CLINIC	Tuberculosis Purified Protein Derivative (PPD) Shot Clinic
	117710		FLUSHOT	Flu Shot Clinic
118		N/A*	HOME TREATMENT SERVICES	Records individual visit by VA personnel to the home of a patient for providing care and/or service. Use only when a more definitive stop code is not available.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
119		N/A*	COMMUNITY NURSING HOME FOLLOW-UP	Records individual visit by VA personnel to patients residing in a community nursing home.
120		2610.00	HEALTH SCREENING	Records patient medical evaluation and/or screening performed at a location other than a VA medical facility.
121		N/A*	RESIDENTIAL CARE (NON-MH)	Records visit by VA personnel to a patient at a residential home care. (Visits of patients in the residential home care program to a VA medical facility are to be recorded to the designated specialty clinic stop.) (If Residential Care is related to Mental Health, use 503.)
122		2610.00	PUBLIC HEALTH NURSING	Records individual patient visit with a licensed R.N. that assess, treats, and/or evaluates the patient in the home due to physical limitations preventing travel of veteran to a VA facility.
123		2610.00	NUTRITION/ DIETETICS/ INDIVIDUAL	Records patient encounter for the purpose of receiving education, information, and/or counseling concerning nutrition and/or dietary matters (including weight control). Use when services are provided to an individual patient.
124		2610.00	NUTRITION/ DIETETICS/ GROUP	Records the encounter of a group of patients for the purpose of receiving education, information, and/or counseling concerning nutrition and/or dietary matters (including weight control). Use when services are provided to more than one patient in the same session.
125		2610.00	SOCIAL WORK SERVICE	Records individual patient visit with a social worker when the visit is not accomplished as a portion of another specialty clinic.
126		2612.00	EVOKED POTENTIAL	An activity that involves the measurement of specific brain electrical responses to discrete sensory stimuli. The evoking stimulus can be VEP (visual), AEP (auditory), or stimulus can be VEP SSEP (somatosensory). Includes physician services, nursing services, technician services, and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME <input type="checkbox"/>	DESCRIPTION
127		2612.00	TOPOGRAPHICAL BRAIN MAPPING	Records visits of patients receiving a technician services, and computerized EEG and brain imaging technique which results in graphic presentation of the data in two-dimensional, color-coded maps of brain electrical activity. Includes physician services, nursing services, technician services, and administrative services.
128		2612.00	PROLONGED VIDEO-EEG MONITORING	Records visits of patients who receive EEG while at the same time being video recorded. Includes physician services, nursing services, technician services, and administrative services.
144		2612.00	RADIONUCLIDE THERAPY	Records patient visit or therapy with unsealed radioactive isotopes and/or radionuclides. Includes technician, physician services and interpretation, safety and administrative services.
145		2612.00	PHARMACOLOGY/ PHYSIOLOGIC NUCLEAR MYOCARDIAL PERFUSION STUDIES	Records patient visit for nuclear cardiac perfusion studies. Includes EKG technician, physician services and interpretation and administrative services.
146		2612.00	Positron Emission Tomography (PET)	Records patient visit for all activities where a cyclotron or generator is employed for the creation of physiologic and/or biochemical premised diagnostic images Includes the generation of the appropriate radionuclide. Includes technician, physician, and administrative services.
147 ^W		2780.00	TELEPHONE/ANCILLARY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or profession staff assigned to: Nursing, Public Health Nursing, Nutrition and/or Dietetics, Social Work Service, or Clinical Pharmacy. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with human immunodeficiency virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
	147209 ^ψ		VIST TELEPHONE	
148 ^ψ		2780.00	TELEPHONE/ DIAGNOSTIC	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and a clinical or professional staff associated with: pulmonary function, x-ray, EEG, EKG, laboratory, nuclear medicine, ultrasound, evoked potential, topographical brain mapping. Includes administrative services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
149		2420.00	RADIATION THERAPY TREATMENT	Records an individual veteran's visit for radiation therapy treatment. Includes technologist services, physicist services, physician services and/or consults, and administrative services. NOTE: Consider a treatment to be the same as a patient visit.
150		2612.00	COMPUTERIZED TOMOGRAPHY (CT)	Records a patient visit for the performance of diagnostic CT exam. Includes technologist services, physician services and interpretation, and administrative services.
151		2612.00	MAGNETIC RESONANCE IMAGING (MRI)	Records a patient visit for the performance of diagnostic MRI exams. Includes technologist services, physician services and interpretation, and administrative services.
152		2612.00	ANGIOGRAM CATHETERIZATION	Records a patient visit for the performance of diagnostic angiographic exams by <u>Catheterization</u> . Includes technologist services, physician, services and interpretations, nursing, radiologist and/or administrative services.
153		2612.00	INTERVENTIONAL RADIOGRAPHY	Records a patient visit in Radiology for the performance of an interventional radiological procedure. Includes all technologist services, physician services and interpretation, and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID* NUMBER	DSS ID PAIR	CDR ACCT	DSS ID* NAME	DESCRIPTION
160		2610.00	CLINICAL PHARMACY	Patient visit with a pharmacist for specialized education, instruction, and/or counseling regarding prescribed medications. <u>Do Not Use For Dispensing Medication From Pharmacy.</u>
165		2610.00	BEREAVEMENT COUNSELING	Records counseling provided to family members and/or friends of deceased patients. (Visits should be reflected as collateral visits).
166		2610.00	CHAPLAIN SERVICE - INDIVIDUAL	Records outpatient visit for individual receiving consultation, spiritual care, treatment, assessment, education, and/or counseling provided by a clinical chaplain. Includes clinical chaplain services and administrative services.
167		2610.00	CHAPLAIN SERVICE - GROUP	Records spiritual care, treatment, assessment, education, and/or counseling provided to more than one individual by a clinical chaplain. Includes clinical chaplain services and administrative services.
168		2610.00	CHAPLAIN SERVICE - COLLATERAL	Records consultation, spiritual care, treatment, education, and/or counseling provided by a clinical chaplain to the patient's family members and/or the person(s) with whom the patient has a meaningful relationship. Includes clinical chaplain services and administrative services.
169 ^w		2780.00	TELEPHONE/ CHAPLAIN	Records patient consultation or medical care management, advice and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical or professional staff assigned to chaplain service. Includes clinical, professional, and administrative services. **Provisions of 38 U.S.C. Section 7332 requires the records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is written consent from the individual.
170		N/A*	HBPC - PHYSICIAN	Home Based Primary Care (HBPC). Records evaluations; treatment orders and follow-up for patients in HBPC, etc.
171		N/A*	HBPC – Registered Nurse (RN)/Registered Nurse Practitioner (RNP)/Physician Assistant (PA)	HBPC. Records initial and continued assessment; teaching patient and caregiver; monitoring patient's condition, supervising Licensed Practical Nurse (LPN)s and Home Health Technician; functioning in expanded nursing role; providing care management and coordination of primary care.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
172		N/A*	HBPC - NURSE EXTENDER	HBPC. Records monitoring observation of physical, nutritional and psychological status; reinforcing rehabilitation measures; demonstrating and teaching use of therapeutic and rehabilitative devices; providing nursing procedures and personal care.
173		N/A*	HBPC - SOCIAL WORKER	HBPC. Records initial and continued assessment of patient and caregiver of interpersonal resources, psychosocial functioning, support system; provides psychosocial treatment including individual and family counseling.
174		N/A*	HBPC - THERAPIST	HBPC. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function.
	174202++ ^ψ	N/A	HBHC – RECREATION THERAPY	HBPC. Recreation Therapy. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function by an HBPC RT professional.
	174205++ ^ψ	N/A	HBPC PHYSICAL THERAPY	HBPC. Physical Therapy. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function by an HBPC PT professional.
	174206++ ^ψ	N/A	HBPC OCCUPATIONAL THERAPY	HBPC. Occupational Therapy. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function by an HBPC OT professional.
175		N/A*	HBPC - DIETITIAN	HBPC. Records assessment of patient's nutritional status, assess adequacy of caregiver's capacity to prepare recommended meals; training of caregiver in efficient ways of managing identified nutritional problems.
176		N/A*	HBPC - CLINICAL PHARMACIST	HBPC. Records assessment and monitoring of drug therapy; identifies patient - specific medication issues; educates patient and caregiver about proper use of medications.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
177		N/A*	HBPC - OTHER	HBPC. Records professional, home health aide and other services provided.
	177201		HBPC-Physical Medicine and Rehabilitation Service (PM&RS)	
	177210		HBPC-Spinal Cord Injury (SCI)	
178 ^ψ		2780.00	HBPC/ TELEPHONE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical or professional staff assigned to HBPC service. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
179++ ^ψ		N/A	TELE-HOME CARE TECHNOLOGY UNIT	Records visits by VA employees using tele-visual means to patients in their homes to evaluate and/or treat wound, ulcerated areas, exercise, patient appearance, advise on patient administered treatment, review pills, etc. The encounter is recorded on a permanent visual tape with electronically recorded nursing notes. Applies to those VA medical centers which have made capital investment in Tele-Home Care Technology. NOTE: For Telemedicine, use credit pair 690.)
180		2710.00	DENTAL	Records outpatient visit of patient for treatment and/or examination relating to dental conditions and accomplished by a dentist and/or dental technician. Includes technician services, dentist services, and administrative services.
181 ^ψ		2780.00	TELEPHONE/ DENTAL	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the persons(s) with whom the patient has a meaningful relationship and clinical or professional staff assigned to Dental Service. Includes administrative and professional services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
190		2510.00	ADULT DAY HEALTH CARE	Records visits of patients to an approved VA program. Purpose of visit is to provide care and/or treatment during day hours only, patient returns home each evening.
201		2611.00	PM&RS	Records patient outpatient visit to PM&RS for consultation and/or evaluation. Includes physician services, technician services, and administrative services.
202		2611.00	RECREATION THERAPY SERVICE	Records patient visit for consultation and/or /evaluation concerning potential benefits of recreational therapy and/or actual participation by an outpatient in a structured, supervised recreational activity. Includes therapist services and administrative services.
203		2611.00	AUDIOLOGY	Records outpatient visit for the purpose of consultation and/or evaluation of patients with hearing impairment. Includes audiologist services, technician services, and administrative services.
204		2611.00	SPEECH PATHOLOGY	Records outpatient visit for the purpose of consultation, evaluation, and/or treatment of patients with speech impediments. Includes pathologist services, therapist and/or technician services, and administrative services.
205		2611.00	PHYSICAL THERAPY	Records outpatient visit for the purpose of receiving treatment from a physical therapist. Includes the therapist services and Administrative services.
206		2611.00	OCCUPATIONAL THERAPY	Records outpatient visit for the purpose of receiving treatment from a occupational therapist. Includes the therapist services and administrative services.
207		2611.00	PM&RS INCENTIVE THERAPY	Records patient visit for evaluation for, or work activity, in the PM&RS Incentive Therapy Program. The rehabilitation program provided under 38 U.S.C. 1718(a) which authorizes assignment of patients to various in house work situations. Pay scale is up to one half of minimum wage. This program is supported by medical care funds.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
208		2611.00	PM&RS COMPENSATED WORK THERAPY (CWT)	Records patient visit for evaluation for, or work activity, in the Physical Medicine and Rehabilitation CWT Program. Involves work subcontracted from and paid for by public or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the Special Fund (STRAF) account at the VA facility.
	208466 ^W		Domiciliary (DOM) CWT	
209		2611.00	VIST COORDINATOR	Records outpatient visit to the Visual Impairment Services Team (VIST) Coordinator to furnish care to the visually impaired veteran. Includes coordinator services and administrative services. In the absence of a VIST Coordinator and when the VIST Coordinators are Performed by another caregiver as collateral duties, i.e., Social Worker; it is appropriate to use the 209 in the primary position and 125 in the credit stop position VIST Telephone visits should be used as indicated:
	209125			VIST Coordinator duties performed by Social Worker
210		2611.00	SPINAL CORD INJURY (SCI)	Records patient outpatient visit for evaluation and/or follow-up of a SCI condition or disease. Includes physician services, technician services, and administrative services.
	210414		SCI-CYSTOURO	
	210468		SCI-RN PROCEDURE	
211		2611.00	AMPUTATION FOLLOW-UP CLINIC	Records outpatient visit for evaluation and/or treatment following removal of a limb or other appendage. Includes physician services, nursing services, and administrative services.
212		2611.00	Electromyogram (EMG)	Records visit for the performance of a diagnostic EMG. (Records the electrical activity evoked in a muscle by nerve stimulation.) Includes technician services, physician interpretation, and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
213		2611.00	PM&RS VOCATIONAL ASSISTANCE	Records patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by the PM&RS Vocational Rehabilitation Therapy staff. This is to include educational therapy and any other rehabilitation medicine vocational rehabilitation therapy not specifically described as PM&RS CWT.
	213466 ^ψ		VETS ED/TRNG DOM	
214		2611.00	KINESIOTHERAPY	Records patient visit for therapy to improve and/or adjust a condition. Includes therapist, physician and administrative services.
215‡		5112.00	SCI HOME CARE PROGRAM	Records visits by VA staff to a patient's home for evaluation and/or follow-up of a SCI condition or disease. Includes physician, nursing, social work, dietetics, rehabilitation, technician, and administrative services.
216 ^ψ		2780.00	TELEPHONE/REHAB & SUPPORT	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship and clinical and professional staff assigned to rehabilitation and support services. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
	216203 ^ψ		TELEPHONE AUDIOLOGY REHAB SERVICE SUPPORT	
	216204 ^ψ		TELEPHONE SPEECH REHAB SUPPORT	

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	216210 ^ψ		SCI TELEPHONE SUPPORT	
217		2611.00	Blind Rehab Outpatient Specialist (BROS)	Records outpatient visit to a BROS (a Blind Rehabilitation Specialist, with multiple training), with blinded veterans either in their home environment or in the VA medical center Outpatient area for pre- or post- Blind Rehabilitation Center or for training vets unable to participate in inpatient programs.
218		2611.00	CAT BLIND REHAB	Computer Assisted Training (CAT) provides specialized services to eligible blinded veterans through comprehensive adaptive computer needs assessment, prescription, training, and issuance of equipment. These veterans for various reasons are not able to attend the inpatient training program and this training is provided in their home environment.
290		2110.00	OBSERVATION MEDICINE	Records outpatient visit for Observation provided by a physician assigned to general medical service. Must use Health Care Finance Administration (HCFA) or Medicare, or Current Procedural Terminology (CPT) code definition of observation. Not to be used for assigning a patient to a bed for Medicine Service Ambulatory Procedures. Includes physician service, ancillary staff and administrative services.
291		2210.00	OBSERVATION SURGERY	Records outpatient visit for Observation provided by a physician assigned to surgery service. Must use HCFA, Medicare, or CPT code definition of observation. Not to be used for assigning a patient to a bed for Surgery Service Ambulatory Procedures Includes physician service, ancillary staff and administrative services.
292		2311.00	OBSERVATION PSYCHIATRY	Records outpatient visit for Observation provided by a physician assigned to psychiatry service. Includes physician service, ancillary staff and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
293		2110.00	OBSERVATION NEUROLOGY	Records outpatient visit for Observation provided by a physician assigned to neurology service. Must use HCFA, Medicare, or CPT code definition of observation. Not to be used for assigning a patient to a bed for Neurology Service Ambulatory Procedures. Includes physician service, ancillary staff and administrative services.
294		2611.00	OBSERVATION BLIND REHAB	Records outpatient visit specifically for Observation Care by a Blind Rehabilitation Specialist.
295		2611.00	OBSERVATION SPINAL CORD	Records outpatient visit for Observation provided by a physician assigned to a spinal cord service. Includes physician service, ancillary staff and administrative services.
296		2611.00	OBSERVATION REHABILITATION	Records outpatient visit for Observation provided by a physician assigned to rehabilitation service. Includes physician service, ancillary staff and administrative services.
301		2110.00	GENERAL INTERNAL MEDICINE	Records outpatient visit for evaluation, consultation, and/or follow-up or treatment provided by a physician assigned to general medicine service. Includes physician services, ancillary staff services and administrative services.
302		2110.00	ALLERGY IMMUNOLOGY	Records visit for consultation, evaluation, and/or follow-up or treatment provided by a physician trained in medical sub-specialty of allergy immunology. Includes physician services, ancillary staff services, and administrative services.
303		2110.00	CARDIOLOGY	Records visit for consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diagnosis and treatment of heart disease. Includes physician services, ancillary staff services and administrative services.
	303201		CARD REHAB	
	303329 – Inactivated 10/1/98		CARDIAC CATH	For outpatient Cardiac Catheterization in a Non-operating room (OR) setting.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
304		2110.00	DERMATOLOGY	Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in skin disease. Includes physician services, ancillary staff services and administrative services.
	304416		DERM PHOTO RX	
305		2110.00	ENDO/METAB (EXCEPT DIABETES)	Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in endocrinology or metabology. Includes physician services, ancillary staff services and administrative services.
306		2110.00	DIABETES	Records consultation, evaluation, follow-up, treatment provided for diabetes mellitus. Includes physician services, ancillary staff services, and administrative services.
	306117		DIAB DM ED	
307		2110.00	GASTRO- ENTEROLOGY	Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and conditions of the gastrointestinal tract. Includes physician services, ancillary staff services and administrative services.
	307117		ENTEROSTOMAL CLINIC	
	307454		LIVER	
308		2110.00	HEMATOLOGY	Records consultation, evaluation, follow-up, treatment provided by physician trained in blood related conditions. Includes physician services, ancillary staff services and administrative services.
309		2110.00	HYPERTENSION	Records consultation, evaluation, follow-up, treatment of high blood pressure. Includes physician services, ancillary staff services and administrative services.
310		2110.00	INFECTIOUS DISEASE	Records consultation, evaluation, follow-up, treatment by physician trained in infectious disease. Includes physician services, ancillary staff services and administrative services.
311		2110.00	PACEMAKER	Records consultation, treatment, evaluation, follow-up for cardiac conditions which benefit from implant stimulation.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
312		2110.00	PULMONARY/CHEST	Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases of the lungs and respiratory tract. Includes physician services, ancillary staff services and administrative services.
313		2110.00	RENAL/NEPHROL (EXCEPT DIALYSIS)	Records consultation, evaluation, follow-up, and/or treatment provided by physician trained in diseases of the kidney. Includes physician services, ancillary staff services and administrative services.
	313457		TRANSPLANT	
314		2110.00	RHEUMATOLOGY/ ARTHRITIS	Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases joint and connective tissue (muscle and joints). Includes the physician services, ancillary staff services and administrative services.
315		2110.00	NEUROLOGY	Records consultation, evaluation, follow-up provided by a physician trained in the treatment of disorders of the nervous system. Includes the physician services and administrative services.
	315456		EPILEPSY	
	315469		MOVEMENT DISORDER	
	315470		SLEEP DISORDER	
316		2110.00	ONCOLOGY/TUMOR	Records consultation, evaluation, follow-up, and/or treatment provided by a physician knowledgeable in the treatment of tumors and malignancies. Includes physician services, ancillary staff services and administrative services.
	316149		RAD RX (WITH ONCOLOGY MEDICINE SERVICE)	
317		2110.00	COUMADIN CLINIC	Records evaluation, follow-up, treatment provided to veterans receiving coumadin. Includes physician services, nursing services, pharmacy and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
318		2110.00	GERIATRIC CLINIC	Consultation, evaluation, follow-up and/or treatment provided by a physician trained in clinical problems associated with aging. Includes physician services and administrative services. This clinic includes specialty (i.e., Falls Clinic, etc.) services for elderly patients but does not function as a GEM clinic.
319		2110.00	GERIATRIC EVALUATION AND MANAGEMENT (GEM) CLINIC	Records patient visit for comprehensive, multi-dimensional evaluation, management and follow-up treatment of selected elderly patients provided by an interdisciplinary team, including physician, nurse and social worker at a minimum, who are trained in assessment and management of the functional, medical and psychosocial problems of the elderly. The GEM clinic provides follow-up of patients discharged from the GEM unit (if available at facility) as well as admits new patients for outpatient evaluation of frail elderly patients. Includes physician, nurse, social work and administrative services.
320		2110.00	ALZHEIMER'S/ DEMENTIA CLINIC	Records patient visit for evaluation, management, and follow-up treatment of patients with Alzheimer's Disease (AD) or related dementias provided by physician and other appropriate health team members trained in the diagnostic aspects of AD and other dementias and the special care needs of the patient and family caregivers. Includes physician, nurse, social work, psychology and administrative services.
321		2110.00	Gastrointestinal (GI) ENDOSCOPY	Records patient visit for performance or examination of part(s) of the gastroenterologic tract and related structures using special instruments by physician or consultants. Examinations may include but not be limited to esophagoscopy, gastroscopy, duodenoscopy, colonoscopy and sigmoidoscopy. Includes physician, nurse, technician and administrative services. DSS Identifier 321 used in the primary position is sufficient if Endoscopy procedure is done in the outpatient endoscopy suite. It may also be used as a credit pair if endoscopy is not done in the endoscopy suite.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
322		2110.00	WOMEN'S CLINIC	Records patient visit to a formal, regularly scheduled women's clinic which provides gender specific and preventive services as well as counseling to women. Includes nurse, nurse practitioner, physician and clinicians providing counseling. (Staff may include gynecologist or facility may have a separate gynecology clinic or refer gynecology to outside practitioners).
323		2130.00	PRIMARY CARE/ MEDICINE	Includes patient encounter with inter-disciplinary team, or health care clinician who is accountable for addressing the majority of health care needs and developing a sustained partnership with patients on their team.
324 ^u		2780.00	TELEPHONE/ MEDICINE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical/professional staff assigned to the medicine service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
325 ^u		2780.00	TELEPHONE/ NEUROLOGY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical or professional staff assigned to Neurology. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
326 ^ψ		2780.00	TELEPHONE/ GERIATRICS	Records patient consultation or medical case management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical or professional staff assigned to the Geriatrics Service. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
327		2211.00	MED MD PERFORM INVASIVE OR PROC	Records the same day operating room preparation, services, and post-operative recovery room care. All operating room care for outpatients should be designated by a DSS Identifier with 327 in the primary position; the medical code related to the medical specialty can be used in the secondary DSS Identifier position as a modifier, if the VA medical center elects to do so.
328		2110.00	MEDICAL/ SURGICAL DAY UNIT (MSDU)	Staffed by nurses paid by Medical, Surgical or Nursing Service to support outpatient medical or surgical patients receiving intensive care or post-op Day Unit care. Some outpatient surgery patients use the recovery room only. If so, stop code 429 includes the services. <u>Do Not</u> use for Observation Care (for outpatient Observation, see Stops 290-296; reference Observation Care, Att. F, par. 5).
329	304329 307329 116329 316329	2110.00	MEDICAL PROCEDURE UNIT	Records invasive medical procedures done in a non-operating room setting. Use only when a more definitive code is not available (321-Endoscopy, 330-Chemotherapy, 333-Cardiac Catheterization, 334-Exercise Tolerance Test (ETT)). Do not use if procedure is done in Operating Room (327). Includes physician and other ancillary staff's time. If procedures are done in a unit or suite, DSS Identifier 329 used in the primary position is sufficient. It is also appropriate to use this code as a credit pair if site wishes to document non-OR invasive medical procedures done in other areas. For example: Dermatology Biopsies Liver Biopsies Respiratory Therapy procedures Oncology and/or tumor procedures

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
330		2420.00	CHEMOTHERAPY PROCEDURES UNIT MEDICINE	A support unit staffed by nurses, technicians, and/or other for the support of patients undergoing outpatient chemotherapy under the care of a Medical Service physician.
331		2110.00	PRE-BED CARE MD (MEDICAL SERVICE)	Medical Service physician evaluation and care of patients intended to be admitted to the hospital in the near future. <u>Do Not</u> use for Observation Care (for outpatient Observation, see Stops 290-296).
332		2110.00	PRE-BED CARE RN (MEDICAL SERVICE)	Nurse evaluation and care support of patients intended to be admitted to Medical Service in the hospital in the near future. Medical Service physician oversight. <u>Do Not</u> use for Observation Care (for outpatient Observation, see Stops 290-296).
333		2110.00	CARDIAC CATHETERIZATION	Records visit for Cardiac Catheterization and related studies in a Cardiac Catheterization Suite or Laboratory Unit. If Cardiac Catheterization is done in a Cardiac Catheterization Suite, DSS Identifier 333 used in the primary position is sufficient.
334		2110	CARDIAC STRESS TEST/ETT	ETT. Records patient visit for cardiac stress tests (either ETT or drug-induced and other related tests in a cardiac exercise tolerance laboratory, or unit). If ETT is done in a special exercise stress test laboratory, unit, or suite, DSS Identifier 334 used in the primary position is sufficient. The Nuclear Medicine part of Cardiac Stress tests (ETT) should be recorded with stop code 109. 334 schedules and reports the cardiology (Medicine Service) contribution only.
350		2110.00	GERIATRIC PRIMARY CARE	Records Primary Care provided to Geriatric patients through coordinated, interdisciplinary provision of medical, nursing, psychosocial services, ongoing and preventive health care services, health education to patients and caregivers, referral for specialty, rehabilitation and other levels of care, follow-up and overall care management by primary care provider and support team.
401		2210.00	GENERAL SURGERY	Records consultation, evaluation, follow-up, treatment provided by a physician trained in general surgical diseases and procedures. Includes physician and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
402		2210.00	CARDIAC SURGERY	Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diseases and surgical procedures relating to the heart. Includes physician services and administrative services.
403		2210.00	ENT	Ear, nose, and throat (ENT) Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diseases and surgical procedures relating to the ear, nose, and throat. Includes physician services and administrative services.
404		2210.00	GYNECOLOGY	Consultation, evaluation, follow-up, treatment provided by a physician trained in the diseases and surgical procedures of the female genital tract. Includes physician services and administrative services.
405		2210.00	HAND SURGERY	Consultation, evaluation, follow-up, provided by a physician trained in surgical hand and bone disorders. Includes physician and/or technician services and administrative services.
406		2210.00	NEUROSURGERY	Consultation, evaluation, follow-up, treatment provided by a physician trained in the diseases and surgical procedures relating to the central and peripheral nervous system. Includes physician services and administrative services.
407		2210.00	OPHTHALMOLOGY	Consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and surgical procedures of the eye. Includes physician services and administrative services.
408		2210.00	OPTOMETRY	Examination, diagnosis and treatment of the eyes for ocular and vision defects. Physician trained in diseases of the eyes. Includes physician services and administrative services.
409		2210.00	ORTHOPEDICS	Consultation, evaluation, follow-up, treatment by a physician trained in diseases and surgical procedures relating to the muscular and skeletal system. Includes physician services and administrative services.
410		2210.00	PLASTIC SURGERY	Consultation, evaluation, follow-up and/or treatment by a physician trained in techniques of reconstructive surgeries. Includes physician services and administrative services.
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TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
411		2210.00	PODIATRY	Consultation, evaluation, follow-up, treatment by a physician trained in disorders of the feet. Includes physician services and administrative services.
412		2210.00	PROCTOLOGY	Consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and surgical procedures relating to the rectum. Includes physician services and administrative services.
413		2210.00	THORACIC SURGERY	Consultation, evaluation, follow-up, treatment provided by a physician trained in surgical procedures relating to the chest. Includes physician services and administrative services.
414		2210.00	UROLOGY	Consultation, evaluation, follow-up, treatment provided by a physician trained in disorders and surgical procedures relating to the urinary tract, both male and female, and male genital organs. Includes physicians' services and administrative services.
	414451		IMPOTENCY	
	414473		URODYNAMICS	
415		2210.00	VASCULAR SURGERY	Consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and surgical procedures of vascular system. Includes physician services and administrative services.
	415461		ADAM CLINIC	Aneurysm Detection and Management (ADAM)
416		2210.00	AMBULATORY SURGERY EVALUATION BY NON-MD	Ambulatory Surgery Care: Records the care, testing and/or education in preparing any patient for a future scheduled ambulatory surgical procedure or on the same day as surgery. This includes administrative, nursing and ancillary services. (Pre-op Anesthesia Care is to be included under Code 419).
417		2614.00	PROSTHETIC, ORTHOTICS	Consultation and/or evaluation, follow-up, and treatment provided by prosthetic, orthotic personnel for the purpose of a measurement, fitting, adjustment, instruction of a prosthetic, orthotic appliance intended to replace, support, substitute for a deformed, weakened, missing anatomical portion of the body. Includes physician services, orthotist, prosthetist services, therapist services and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	417201		MAJOR MED DEVICES PROSTHETICS	
	417451		WHEEL CHAIR	
	417452		CUSHION	
	417455		SHOE/BRACE	
	417473 - inactivate 10/1/98		ORTHOTIC LAB	
	417474 - inactivate 10/1/98		PROSTHETIC LAB	
418		2614.00	AMPUTATION CLINIC	Consultation, evaluation, follow-up, treatment provided following surgical removal of, or loss of, a limb, extremity (all or partial). Includes the physician services, prosthetist services, and administrative services.
419		2210.00	ANESTHESIA PRE- OP/POST-OP CONSULT	Consultation provided to outpatient in preparation for surgical procedures. Or immediately after an operation. Should not be used for non-operation related work. Includes services of anesthesiologist and administrative services.
420		2210.00	PAIN CLINIC	Consultation, follow-up, treatment for management of pain. Physician assigned is determined at station level. Includes physician services, other clinicians, and administrative services.
421		2210.00	VASCULAR LABORATORY	Records patient visit for the performance of diagnostic blood vessel flow procedures (Dopplers, etc.) Includes physician services, interpretation, technician services and administrative services, under the direction of the Chief of Surgery.
422		2210.00	CAST CLINIC	Records visit for the purpose of application, measurement, adjustment, removal of plaster casts and splints. Clinic is normally staffed by a Orthopedic physician or technician. Includes physician and/or technician services and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
423		2614.00	PROSTHETIC SUPPLY ORDERING SERVICE	Records patient visit for consultation, evaluation, education, information, and/or counseling concerning eligibility for prosthetic services, appliances, devices and benefit claims and prescription processing. Includes prosthetic representative and administrative services. Includes dispensing of Prosthetic Supplies to patients as available.
424 ^v		2780.00	TELEPHONE/ SURGERY	Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and/or professional staff assigned to the surgical service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
425 ^v		2780.00	TELEPHONE/ PROSTHETICS/ ORTHOTICS	Records patient consultation or medical care management, advice and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to prosthetics or orthotics. Includes administrative and professional services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
426		2210.00	WOMEN SURGERY	Consultation/evaluation follow-up treatment relative to the diseases and surgical procedures of the female gender. Includes clinical and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
427 - (Inactivated 10/1/97)		2230.00	PRIMARY CARE/ SURGERY	Records patient care provided through a coordinated interdisciplinary approach consisting of: (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity; and (f) patient and non-professional care giver education and training. Includes clinical and administrative services.
428 ^W		2780.00	TELEPHONE/ OPTOMETRY	Records patient consultation or medical care management, advice and/or referral provided by telephone contact between patient or patient's next-of-kin and/or person(s) with whom the patient has a meaningful relationship and the clinical and/or professional staff assigned to optometry. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
429		2211.00	OUTPATIENT CARE IN THE OPERATING ROOM	Records the same day operating room preparation, operating room services, and post-operative recovery room care. All operating room care for outpatients should be designated by a DSS Identifier with stop code 429 in the primary position. This applies to all surgical clinics set up to automatically receive data via the surgery VISTA package interface to PCE. The surgical stop code related to the surgical specialty can be used in the secondary DSS Identifier position as a modifier, if the VA medical center selects to do so.
430		2211.00	CYSTO ROOM UNIT FOR OUTPATIENT	Staffed by Surgical Service paid technician(s) or nurses, and a Surgical Service physician performs the procedure(s), in Cysto Room unit for outpatients.
431		2420.00	CHEMOTHERAPY PROCEDURES UNIT -SURGERY	A support unit staffed by nurses, technicians and/or others for the support of patients undergoing outpatient chemotherapy under the care of a Surgical Service physician.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
432		2210.00	PRE-BED CARE M.D. (SURGICAL SERVICE)	Surgical Service physician evaluation and care of patients intended to be admitted to the hospital in the near future.
433		2210.00	PRE-BED CARE RN (SURGERY)	Nurse evaluation and care support of patients intended to be admitted to Surgery Service in the hospital in the near future. Surgical Service physician oversight.
435		2210.00	SURGICAL PROCEDURE UNIT	Records invasive surgical procedures done in a non-operating room setting. Use only when a more definitive code is not available (430- Cysto, 431- Chemotherapy). Do not use if procedure is done in Operating Room (429). Includes physician and other ancillary staff 's time. If procedures are done in a unit or suite, DSS Identifier 435 used in the primary position is sufficient. It is also appropriate to use this code as a credit pair if site wishes to document invasive surgical procedures done in other areas.
	450 thru 485*	N/A*	*Use as credit pairs only. (See DSS Stop Code Book 1/97 for List A DSS Guides)	May use at discretion of facility without VA Central Office approval. Used only for tracking and counting of workload. They may not be assigned to a cost distribution account and do not impact on outpatient workload visits unless another designated or approved stop code is reported, as primary
	450		Compensation and Pension (C&P) EXAMS (available in FY 97)	
	451			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	452			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	453			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	454			SPECIAL REGISTRY 5
	455			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	456			SPECIAL REGISTRY 6
	457			TRANSPLANT
	458			SPECIAL REGISTRY 7

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	459			SPECIAL REGISTRY 8
	460			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	461			SPECIAL REGISTRY 1
	462			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	463			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	464			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	465			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	466			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	467			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	468			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	469			SPECIAL REGISTRY 2
	470			SPECIAL REGISTRY 3
	471			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	472			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	473			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	474			RESEARCH
	475			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	476			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	477			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	478			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	479			SPECIAL REGISTRY 4
	480			COMPREHENSIVE FUNDOSCOPY EXAM - This DSS identifier may only be used in the credit position. It is primarily to be used with identifiers 301, 305, 306, 309, 323, 350, 407 and 408 whenever a comprehensive fundoscopic examination is performed, i.e., for patients with diabetes or hypertension; however, it may be used in conjunction with any other DSS identifier should the need arise.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VistA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	481		BRONCHOSCOPY	If Bronchoscopy is done, 481 is to be used as the credit pair for the primary outpatient unit which performs the procedure – (CDR account used is the CDR account for the primary) for example:
	321481			if Outpatient Bronchoscopy is done in the Endoscopy Room
	327481			if Outpatient Bronchoscopy is done in the OR by Medicine
	329481			if Outpatient Bronchoscopy is done in the Ambulatory Procedures Unit
	429481			if Outpatient Bronchoscopy is done by Surgery in the OR
	435481			if Outpatient Bronchoscopy is done in “Lumps and Bumps” Surgery Procedure Unit
	482			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	483			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	484			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
	485			SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED
501 - Inactivated 10/1/94		N/A*	HOMELESS MENTALLY ILL OUTREACH	Records any visit, relating to the care of a homeless chronically mentally ill patient, made to a community-based non-VA facility. May include physician services, psychology services, social services, nursing services and administrative services.
502		2311.00	MENTAL HEALTH CLINIC INDIVIDUAL	Individual evaluation, consultation, and/or treatment by clinical staff trained in mental diseases and disorders. Includes clinical services and administrative services.
503		N/A*	MENTAL HEALTH RESIDENTIAL CARE INDIVIDUAL	Records visits to a patient residing in: a <u>community</u> nursing home, a boarding home, a community home, etc. Includes physician, nursing, social work, and administrative services. (If not residential care related to Mental Health, use 121)
504 - Inactivated 4/1/97		5117.00	IPCC MEDICAL CENTER VISIT	Only VA medical centers approved to participate in the IPCC Program may use this code. This records visits of patients and/or their families or caregivers to IPCC staff on the VA medical center grounds or at a VA outpatient clinic. Includes clinical and administrative services provided IPCC patients by IPCC staff. Additional stop codes may not be taken for the same workload.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
505		2311.00	DAY TREATMENT-INDIVIDUAL	Records individual patient visit for ongoing treatment and rehabilitation services, of patients with mental health and psychogeriatric disorders, who require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u> . Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services.
506		2311.00	DAY HOSPITAL - INDIVIDUAL	Records individual patient visits for evaluation, treatment, and/or rehabilitation of patients with mental health disorders, that require intensive diagnostic and treatment services up to 4 to 8 hours per day, 3 to 7 days per week. Is typically prioritized along the lines of <u>crisis treatment, transitional care, and rehabilitation</u> as opposed to continuing care and community maintenance. Day hospital clinics serve patients who are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services.
507 - Inactivated 4/1/97		2316.00	DRUG DEPENDENCE - INDIVIDUAL	Records patient visits for individual evaluation, consultation, follow-up, and treatment provided by a facility's formal Drug Dependence Treatment Program. Includes clinical and administrative services.
508 - Inactivated 4/1/97		2316.00	ALCOHOL TREATMENT - INDIVIDUAL	Records patient visits for individual evaluation, consultation, follow-up and treatment provided by a facility's formal Alcohol Dependence Treatment Program. Includes clinical and administrative services.
509		2311.00	PSYCHIATRY – MD INDIVIDUAL	Records individual patient visit for the purpose of evaluation, follow-up, and treatment provided by a physician trained in mental, emotional and behavioral disorders. May prescribe medications. Includes <u>physician</u> and administrative services.
510		2311.00	PSYCHOLOGY - INDIVIDUAL	Records individual patient visit for the purpose of evaluation, follow-up, and treatment provided by a psychologist trained in mental, emotional and behavioral disorders. Includes clinical services and administrative services.
	510473 – Inactivate 10/1/99		NEURO PSYCHOLOGY LAB	Records the individual patient visit for the purpose of neuropsychological assessments performed by a specially trained psychologist in neuropsychological evaluations. Assessments usually are performed in a designated lab setting.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	510474 ^ψ		PSO RESEARCH	Records the individual patient visit for evaluation, follow-up, and treatment involved in a research protocol under the direction of Psychology Service
	510475 – Inactivate 10/1/98		RESEARCH	Use 510-474
	510509 – Inactivate 10/1/99		PSO-PSI	
512		2311.00	PSYCHIATRY CONSULTATION	Records patient consultation with a physician trained in mental, emotional and behavioral disorders. Includes physician and administrative services.
513		2316.00	SUBSTANCE ABUSE - INDIVIDUAL	Records patient visits for individual evaluation, consultation, follow-up, and treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT/transitional Residence (TR) Program. Includes clinical and administrative services. If the program is exclusively for alcohol-dependent clients, use 513-461. If the program is exclusively for drug-dependent clients, use 513-469. If the program is for generic substance abuse (drug and alcohol), use 513 alone - without a secondary DSS Identifier.
	513461	2316.00	INDIVIDUAL SUBSTANCE ABUSE: ALCOHOL DEPENDENCE	Records patient visits for individual evaluation, consultation, and follow-up treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT/TR Program. Includes clinical and administrative services. For a program exclusively treating alcohol-dependent clients.
	513469	2316.00	INDIVIDUAL SUBSTANCE ABUSE: DRUG DEPENDENCE	Records patient visits for individual evaluation, consultation, follow-up, and/or treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT/TR Program. Includes clinical and administrative services: for clients with drug dependence. For a program exclusively treating drug-dependent clients.
514		2316.00	SUBSTANCE ABUSE - HOME VISIT	Records visit by VA staff to patients with history of alcohol and drug abuse. The visit is accomplished in the patient's residence. Includes clinical services and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
515 - Inactivated 4/1/97		2311.00	CWT/TR-HCMI	CWT/TR visits by outpatients who are in CWT/TR programs which were funded by HCMI. These visits reflect the CWT work component as well as the independent living skills training and treatment of this comprehensive community re-entry program.
516		2310.00	PTSD - GROUP	Records consultation and/or treatment follow-up provided to more than one individual. Treatment is provided to those patients with PTSD. Includes clinical services and administrative services. This activity does not take place through a designated PCT.
	516726		PTSD DOM-AFTERCARE-GROUP	Records consultation and treatment follow-up to more than one individual with a PTSD. Includes clinical and administrative services provided to discharged DOM patients by Psychiatry staff. This activity does not take place through a designated PCT.
517 - Inactivated 4/1/97		2316.00	CWT/ SUBSTANCE ABUSE	Compensated work therapy visits by outpatients who are in a substance abuse program which have been enhanced to support CWT.
518 - Inactivated 4/1/97		2316.00	CWT/TR - SUBSTANCE ABUSE	CWT/TR visits by outpatients who are in CWT/TR programs which were funded by substance abuse. These visits reflect the CWT work component as well as the independent living skills training and treatment of the comprehensive community re-entry program.
519		2317.00	SUBSTANCE USE DISORDER/PTSD TEAMS	<u>Approved VA medical centers only.</u> Records visit to a treatment team designed to treat substance use disorders (drug and alcohol) in conjunction with PTSD. Includes clinical services and administrative services.
520+		2311.00	LONG-TERM ENHANCEMENT - INDIVIDUAL	For use by <u>approved</u> long term psychiatric care hospitals. Provides Individual outpatient support for maintenance in the community of chronic mentally ill veterans with a history of institutional dependence.
521		2310.00	LONG-TERM ENHANCEMENT - GROUP	For use by <u>approved</u> long-term psychiatric care hospitals. Provides group outpatient support for chronic mentally ill patients to continue living in the community.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
522		2318.00	HUD-VASH	Records visits by staff of the HUD-VASH program for homeless veterans and families of these veterans. Workload should reflect activity related to permanent housing as well as caring for formerly homeless veterans in permanent housing. Includes physician services, psychology services, social services, nursing services, rehabilitation services and administrative services.
523		2316.00	OPIOID SUBSTITUTION	Outpatient treatment of opiate dependent clients by OPIOID substitution, including methadone maintenance, by the facility's formal substance abuse program. Includes clinical services and administrative services.
524 ^u		2311.00	ACTIVE DUTY SEX TRAUMA	Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment of a sexual nature, while serving on active military duty. Services include clinical and administrative services. (Public Law 102-585)
525 ^u		2311.00	WOMEN'S STRESS DISORDER TREATMENT TEAMS	Records contacts with veterans seen by Women's Stress Disorder Treatment teams at officially VA Central Office designated VA medical centers.
526 - Inactivated 4/1/97		2780.00	TELEPHONE/ SPECIAL PSYCHIATRY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the special psychiatry service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
527 ^W		2780.00	TELEPHONE/ GENERAL PSYCHIATRY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the general psychiatry service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
	527564+ ^W		TELEPHONE MH TEAM CASE MANAGEMENT	Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical, professional staff assigned to the MH Team Case Management program. Includes administrative and clinical services. NOT to be used for telephone contacts with the New England Program Evaluation Center (NEPEC)-supported Intensive Psychiatric Community Care (IPCC) teams. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV or sickle cell anemia, are strictly confidential and may not be released, discussed unless there is written consent from the individual.
528 ^W		2780.00	TELEPHONE/ HOMELESS MENTALLY ILL	Records patient consultation or medical care management, advice, and/or referral provided by staff funded through the Health Care for Homeless Veterans (HCHV) programs (except for those programs assigned to other specific stop codes, such as the HUD-VASH program) to homeless veterans with mental and or substance abuse disorders, or to family members of these veterans. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
529		2312.00	HCHV/HMI	Records any visit provided by clinical staff funded through a HCHV program (except for the programs with specific stop codes, such as the HUD-VASH program) to Homeless Chronically Mentally Ill (HCMI) veterans with mental and/or substance abuse disorders or family members of such veterans.
530 ^ψ		2780.00	TELEPHONE/ HUD-VASH	Records patient consultation or medical care management, advice, and/or referral provided by telephone staff of the HUD-VASH program to homeless veterans who are being case-managed in the HUD-VASH program, or who are being screened for placement, and to family members of these veterans. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
531		2331.00	MENTAL HEALTH PRIMARY CARE TEAM - INDIVIDUAL	Records individual care provided to patients assigned to a Mental Health Primary Care Team, characterized by a coordinated interdisciplinary approach consisting of; (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and, (f) patient and non-professional care giver education and training. Includes clinical, ancillary and administrative services.
532		2315.00	PSYCHOSOCIAL REHABILITATION INDIVIDUAL	Records individual services provided to aid veteran's successful community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by Psychosocial Rehabilitation Programs and other programs where more specific DSS Identifiers do not exist.)
535		2315.00	MH VOCATIONAL ASSISTANCE INDIVIDUAL	Records individual patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by Vocational Rehabilitation (Voc Rehab) Therapy programs for veterans with psychosocial rehabilitation needs.
536 ^ψ		2780.00	TELEPHONE/ MH VOCATIONAL ASSISTANCE	Records vocational services provided via telephone for veterans with psychosocial rehabilitation needs.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
537 ^w		2780.00	TELEPHONE/ PSYCHOSOCIAL REHABILITATION	Records services provided via telephone to aid veterans' community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by psychosocial rehabilitation programs where more specific DSS Identifiers do not exist).
538++		2311.00	PSYCHOLOGICAL TESTING	Records the individual patient encounter for psychological and/or neuropsychological assessment, using psychometric instruments or tests interpreted by a psychologist.
540		2313.00	PCT POST - TRAUMATIC STRESS INDIVIDUAL	Records consultation, evaluation, and/or follow-up provided to a patient with a diagnosis of post traumatic stress syndrome. Treatment is provided by a Specialty Multidisciplinary clinical team. PCT.
542 ^w		2780.00	TELEPHONE/ PTSD	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the PCT. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.
543 - Inactivated 4/1/97		2316.00	TELEPHONE/ ALCOHOL DEPENDENCE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the alcohol dependence treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal their identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
544 – Inactivated 4/1/97		2316.00	TELEPHONE/ DRUG DEPENDENCE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the dependence treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.
545 ^ψ		2780.00	TELEPHONE/ SUBSTANCE ABUSE	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the substance abuse treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.
	545461 ^ψ	2780.00	TELEPHONE SUBSTANCE ABUSE TREATMENT - ALCOHOL DEPENDENCE	Use for Alcohol Dependence Treatment Phone Calls. Using the full definition for 545.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	545469 ^ψ	2780.00	TELEPHONE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENCE	Use for Drug Dependence Treatment Phone Calls. Using the full definition for 545.
546+ ^ψ		2780.00	TELEPHONE/ MHICM	Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical, professional staff assigned to the special MHICM teams (see 552). Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
547		2316.00	INTENSIVE SUBSTANCE ABUSE TREATMENT	Records visits for intensive substance abuse services provided by substance abuse treatment program staff. Treatment program is usually an interdisciplinary outpatient program designed for substance abuse clients based upon day hospital, day treatment, psychosocial rehabilitation models (may include outpatient detoxification). Patients generally are expected to participate in a program of 3 or more hours per day, 3 days a week at a minimum.
	547461		INTENSIVE SUBSTANCE ABUSE TREATMENT- ALCOHOL DEPENDENCE	Use only for an intensive substance abuse treatment program exclusively treating alcohol-dependent clients. (See the full definition for 547).

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	547469		INTENSIVE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENT	Use only for an intensive substance abuse treatment program exclusively treating drug-dependent clients. (See the full definition for 547).
550+		2310.00	MENTAL HEALTH CLINIC (GROUP)	Records services assigned to a group of outpatients by any clinical specialty assigned to the Mental Health Clinic.
551 - Inactivated 4/1/97		5117.00	IPCC COMMUNITY CLINIC/ DAY PROGRAM VISIT	Only VA medical centers approved to participate in the IPCC Program may use this code. This records visits with patients and/or their families or caregivers to IPCC staff at identified IPCC satellite clinics, IPCC storefronts or IPCC offices not on the VA medical center grounds or at a VA outpatient clinic. Includes clinical and administrative staff. Additional stop codes may not be taken for the same workload.
552+ ^ψ		5117.00	MENTAL HEALTH INTENSIVE CASE MANAGEMENT (MHICM)	<u>Only VA medical centers approved to participate in MHICM (previously IPCC) programs monitored by NEPEC may use this code.</u> This records visits with patients and/or their families or caregivers by MHICM staff at all locations including VA outpatient or MHICM satellite clinics, MHICM storefronts, MHICM offices, or home visits. Includes clinical and administrative services provided MHICM patients by MHICM staff. Additional stop codes may not be taken for the same workload.
553		2310.00	DAY TREATMENT-GROUP	Records treatment to a group of patients with mental health and psychogeriatric disorder, for ongoing and rehabilitation services. Patients require clinical assistance and support for 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u> . Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
554		2310.00	DAY HOSPITAL- GROUP	Records care provided to a group of patients for evaluation, treatment, and rehabilitation of patients with mental health disorders, who require intensive diagnostic and treatment services up to 4 to 8 hours per day, 3 to 7 days per week. Day hospital clinics are typically prioritized along the lines of <u>crisis treatment, transitional care, and rehabilitation</u> as opposed to continuing care and community maintenance. Patients are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services.
555 - Inactivated 4/1/97		2316.00	DRUG DEPENDENCE - GROUP	Records patients visits for group follow-up, treatment, and evaluation by a facility's formal Drug Dependence Treatment Program. Includes clinical and administrative services.
556 - Inactivated 4/1/97		2316.00	ALCOHOL TREATMENT - GROUP	Records patient visits for a group follow-up, treatment, and evaluation by a facility's formal Alcohol Dependent Treatment Program. Includes clinical and administrative services.
557		2310.00	PSYCHIATRY - GROUP	Records treatment and follow-up provided to a group of veterans by a physician trained in mental, emotional and behavioral disorders and may prescribe medications. Includes physician services and administrative services.
558		2310.00	PSYCHOLOGY - GROUP	Records treatment and follow-up provided to a group of patients by a psychologist trained in mental, emotional, and behavioral disorders. Includes psychologist services and administrative services.
559		2314.00	PSYCHOSOCIAL REHABILITATION GROUP	Records group services provided to aid veterans' successful community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by psychosocial rehabilitation programs where more specific DSS Identifiers do not exist).
560		2316.00	SUBSTANCE ABUSE - GROUP	Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VistA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	560461	2316.00	GROUP SUBSTANCE ABUSE: ALCOHOL DEPENDENCE	Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services. For a program exclusively treating alcohol-dependent clients.
	560469	2316.00	GROUP SUBSTANCE ABUSE: DRUG DEPENDENCE	Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services. For a program exclusively treating drug-dependent clients.
561		2313.00	PCT-POST TRAUMATIC STRESS GROUP	Records group therapy provided to patients with diagnosis of PTSD. Treatment is provided by Specialty Multidisciplinary clinical team. PC.
562		2311.00	PTSD - INDIVIDUAL	Records consultation, evaluation, follow-up, and/or treatment provided to an individual with PTSD. This activity does not take place through a designated PTSD clinical team. Includes clinical and administrative services.
563		2330.00	MENTAL HEALTH PRIMARY CARE TEAM - GROUP	Records care provided to a group of patients assigned to a Mental Health Primary Care Team characterized by a coordinated interdisciplinary approach consisting of; (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and (f) patient and non- professional care giver education and training. Includes clinical and administrative services.
564+ ^ψ		2311.00	MH TEAM CASE MANAGEMENT	Records visits with patients and/or their families or caregivers by members of a Mental Health case management team performing Mental Health community case management at all locations. Includes administrative and clinical services provided to patients by team members. <u>NOT</u> to be used for visits by MHICM teams (see DSS Identifier #552) for case management by individuals who use other stop codes).

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
573		2314.00	MH INCENTIVE THERAPY-GROUP	Records patient visit for, or work activity in, the Incentive Therapy Program provided by Psychology, Psychiatry, Social Work, Domiciliary or any other service other than PM&RS. This is a rehabilitation program provided under 38 U.S.C. 618(A) which authorizes assignment of patients to various in-hospital work situations. Pay scale is up to one-half minimum wage. This program is supported by medical care funds.
574		2314.00	MH COMPENSATED WORK THERAPY (CWT) GROUP	Records patient visit for evaluation for, or work activity in, the CWT/Veterans Industries (VI) Program provided by Psychology, Psychiatry, Social Work, Domiciliary or other service other than PM&RS. Involves work subcontracted from and paid for by public and/ or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the Special Therapeutic and Rehabilitation Activities Fund (STRAF) account at the VA facility.
	574513 – Inactivated 10/1/98	2314.00‡	MH CWT/ SUBSTANCE ABUSE	Records CWT patient visits by outpatients who are in a Substance Abuse Program that was enhanced to Support CWT. Included here are evaluations for, work activity in, the CWT/VI Program provided by Psychology, Psychiatry, Social Work, Domiciliary or other service other than PM&RS. Involves work subcontracted from and paid for by public and/or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the STRAF account at the VA facility.
575		2314.00	MH VOCATIONAL ASSISTANCE GROUP	Records patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by the Vocational Rehabilitation Therapy Program provided by Psychology, Psychiatry, Social Work, Domiciliary or any other service other than PM&RS.
576		2311.00	PSYCHO- GERIATRIC CLINIC, INDIVIDUAL	Records individual evaluation, consultation, and/or treatment by clinical staff in a designated psychogeriatric outpatient clinic. Includes clinical and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
577		2310.00	PSYCHO-GERIATRIC CLINIC, GROUP	Records treatment, evaluation, and/or rehabilitation provided to a group of patients in a designated psycho-geriatric clinic. Includes clinical and administrative services.
578		2310.00	PSYCHO-GERIATRIC DAY PROGRAM	Records all patient visits in a local or nationally designated psychogeriatric day program for ongoing treatment and rehabilitation of psychogeriatric disorders. Includes clinical and administrative services.
579 ^ψ		2780.00	TELEPHONE/PSYCHO-GERIATRICS	Records patient consultation of medical care management, advice, and/or referral provided by telephone contact between patient or patient's relative and/or caregivers and the clinical and professional staff assigned to a designated psychogeriatric program. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual.
580		2310.00	PTSD DAY HOSPITAL	Records psychiatric treatment to an individual or group of patients diagnosed with post traumatic stress disorders, who require <u>intensive diagnostic and treatment services</u> up to 4 to 8 hours per day, 3 to 7 days per week. PTSD day hospital clinics typically are prioritized along the lines of crisis treatment, transitional care, and rehabilitation as opposed to continuing care and community maintenance. Patients are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
581		2310.00	PTSD DAY TREATMENT	Records therapeutic psychiatric outpatient services to an individual or a group of patients diagnosed with PTSD, who require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u> . Patients in day treatment are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting.
589		2311.00	NON-ACTIVE DUTY SEX TRAUMA	Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment experienced during childhood; any pre-active and post active duty status (<u>Not On Active Duty</u>). Services include clinical and administrative services. (Public Law 102-585) If Trauma occurred on Active Duty, use 524.
590		2319.00	COMMUNITY OUTREACH TO HOMELESS VETS BY STAFF OTHER THAN HCHV AND DCHV PROGRAMS	Records outreach services to veterans carried out by VA staff other than designated staff of the HCHV or DCHV programs.
602		2410.00	CHRONIC ASSISTED HEMODIALYSIS TREATMENT	Records visit for the purpose of receiving hemodialysis. Includes clinical and administrative services.
603		2410.00	LIMITED SELF CARE HEMODIALYSIS TREATMENT	Records visits where patient assists in hemodialysis and requires only limited staff assistance.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
604		2410.00	HOME/SELF HEMODIALYSIS TRAINING TREATMENT	Records outpatient for the purpose of education and/or training in the techniques of performing hemodialysis at veteran's residence or receiving dialysis at a facility. Includes clinical and administrative services.
606		2410.00	CHRONIC ASSISTED PERITONEAL DIALYSIS	Records outpatient visit for the purpose of receiving peritoneum dialysis. Includes clinical and administrative services.
607		2410.00	LIMITED SELF CARE PERITONEAL DIALYSIS	Records visit where patient actively assists in own peritoneal dialysis treatments and requires only limited staff assistance.
608		2410.00	HOME/SELF PERITONEAL DIALYSIS TRAINING	Records outpatient visit for the purpose of education and/or training in the techniques of performing peritoneal dialysis at veteran's residence or peritoneal dialysis at a facility. Includes clinical and administrative services.
610		N/A*	CONTRACT DIALYSIS	Records visit for Contract Dialysis. Includes services on contract for Contract Dialysis and related Medical services, provided to veteran patients.
611 ^ψ		2780.00	TELEPHONE/ DIALYSIS	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the Dialysis treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual.
650++ ^ψ		N/A	CONTRACT NURSING HOME DAYS	Records number of CNH days which the patient had in VA- paid, Vendor-provided CNH for that month. <i>Not for use on PCE. Only for use on ECS.</i>

TABLE F, FY2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
651++ ^ψ		N/A	STATE NURSING HOME DAYS	Records number of State Nursing Home (SNH) days which the patient had in a VA- paid, State Provided SNH for that month. <i>Not for use on PCE. Only for use on ECS.</i>
652++ ^ψ		N/A	STATE DOMICILIARY HOME DAYS	Records number of State Domiciliary home days which the veteran had in a VA- paid, State home for that month. <i>Not for use on PCE. Only for use on ECS.</i>
653++ ^ψ		N/A	STATE HOSPITAL CARE	Records information about State Hospital Days and other information which a veteran had in a VA-paid State Hospital. <i>Not for use on PCE. Only for use on ECS.</i>
680++ ^ψ		N/A	HCHC ASSESSMENT	Visit by VA medical center staff to a patient at home or in a community center to provide assessment for or about vendor-provided home and/or community health care (HCHC). Specifically applies to VA staff visits to patients referred to VA- paid, vendor-provided HCHC. For VA-staff provided home care not specifically meeting criteria for stops 170-178 or 680, use stop code 118.
681++ ^ψ		N/A	VA-PAID HCHC	Records number of visits per month provided to a veteran by a VA-paid HCHC vendor. <i>Not for use on PCE. Only for use on ECS.</i>
682++ ^ψ		N/A	VA-REFERRALS TO HCHC PROVIDERS	Records for statistics only the VA-referrals for HCHC Services of patients seen by VA medical center staff in clinic or home settings. Should not be used to report VA medical center FTE staff time actually assessing for patients cared for by VA-paid, vendor-provided HCHC. For that work use 680. <i>Not for use on PCE. Only for use on ECS.</i>
	690++ ^ψ	N/A*	TELEMEDICINE	Records care for patients provided by telemedicine consultation services. This secondary code can be attached to any primary stop code related to the workgroup that provides telemedicine consultations (SCI, Dermatology, Eye, Radiology, etc.)
	701 thru 711	N/A	DSS Credit Pairs	Generally used as secondary stop code for modifier to collect special statistics (with a primary stop code like 301, or 323).
	701	N/A*	HYPERTENSION SCREENING	Records outpatient visit for the purpose of measurement, consultation, and/or education relating to controlling high blood pressure. Includes clinical and administrative services.

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TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VistA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
	702	N/A*	CHOLESTEROL SCREENING	Records outpatient visit for the purpose of consultation and/or education in methods of improving serum cholesterol levels. Includes clinical and administrative services.
	703	N/A*	MAMMOGRAM	Records outpatient visit for the purpose of mammary gland x-ray. Includes clinical and administrative services.(Age restriction eliminated.)
	704	N/A*	PAP TEST	Records female outpatient visit for the purpose of cervical and/or vaginal examination for cancer screening. Includes clinical and administrative services. (Age restriction eliminated.)
	705	N/A*	FOBT - GUIAC SCREENING	Records outpatient visit for the purpose of testing for blood in stool. Includes clinical and administrative services.
	706	N/A*	ALCOHOL SCREENING	Records outpatient visit for the purpose of screening veterans for potential admission into the alcohol treatment unit or program. Includes clinical and administrative services.
	707	N/A*	SMOKING CESSATION	Records outpatient visit for the purpose of counseling and/or instruction in various methods to stop smoking. Includes clinical and administrative services.
	708	N/A*	NUTRITION	Records outpatient visit for the purpose of consultation and/or education in dietary and nutritional health (including weight control). Includes clinical and administrative services.
	709	N/A*	PHYSICAL FITNESS/ EXERCISE COUNSELING	Records outpatient visit for the purpose of consultation and/or education in proper exercise and fitness techniques. Includes clinical and administrative services.
	710	N/A*	INFLUENZA IMMUNIZATION	Records outpatient visit for the purpose of influenza immunization injection. Includes clinical and administrative services. Is not restricted to veterans.
	711	N/A*	INJURY COUNSEL/ SEAT BELT USAGE	Records outpatient consultation and/or education in prevention of injuries. Includes clinical and administrative services.
	712++ ^ψ	N/A*	HEP C REGISTRY PATIENT	Used as a secondary. Indicates clinic care was provided for patients who had a previously confirmed Hepatitis C diagnosis. May be used with relevant primary codes such as 307.
725		5115.00	DOMICILIARY OUTREACH SERVICES	Records visit made by VA domiciliary staff relating to case-finding and/or contract services to homeless veterans. Includes clinical and administrative services.

TABLE F, FY 2000 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

DSS ID NUMBER	DSS ID PAIR	CDR ACCT	DSS ID NAME	DESCRIPTION
726		5115.00	DOMICILIARY AFTERCARE - COMMUNITY	Records visit made by VA domiciliary staff for care to discharged domiciliary patients being followed in the community as part of a domiciliary discharge plan. Includes clinical and administrative services.
727		2750.00	DOMICILIARY AFTERCARE-VA	Records outpatient visit of discharged domiciliary patients to a VA domiciliary follow-up clinic for care as part of a domiciliary discharge plan. Includes clinical and administrative services.
728		2111.00‡	DOMICILIARY ADMISSION SCREENING SERVICES	Records all activities associated and involved in the admitting and screening process of patients applying for Domiciliary care. This includes administrative, physician, nursing and ancillary services.
729 ^ψ		2780.00	TELEPHONE/ DOMICILIARY	Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and/or professional staff assigned to the VA Domiciliary staff. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual.
731		N/A*	PR RTP- GENERAL CARE	The use of this code is <u>optional</u> and should <u>only</u> be used for those facilities who desire to identify residential care products via ECS. (Do <u>not</u> use for scheduling or cost purposes.)
900 - inactivate 10/1/98		N/A*	SPECIAL SERVICES	Use in conjunction with appropriate credit stop code when an ambulatory procedure is performed. Also need to annotate the appropriate CPT code for the procedure.
999 ^ψ		2610.00	EMPLOYEE HEALTH	Records visit of employee to a designated employee health service. Includes physician services and clinical services and administrative services.
	999510		PSO-EAP	Optional

ATTACHMENT K

ANCILLARY STOP CODES AND HEALTH ADMINISTRATION SERVICE (HAS) EXEMPT STOP CODES

NOTE: Other lists of value in analyzing Department of Veterans Affairs (VA) medical center Decision Support System (DSS) Identifiers use Attachment L or in creating detailed DSS outpatient clinic feederkeys use Attachment M.

DSS IDENTIFIER		DESCRIPTION
Ancillary	Exempt ♦	
104	104	PULMONARY FUNCTION
105	105	X-RAY
106	106	Electroencephalogram (EEG)
107	107	Electrocardiogram (EKG)
	107473	ECHOCARDIOGRAM
108	108	LABORATORY
109	109	NUCLEAR MEDICINE
115	115	ULTRASOUND
116		RESPIRATORY THERAPY
126	126	EVOKED POTENTIAL
127	127	TOPOGRAPHICAL BRAIN MAPPING
128	128	PROLONGED VIDEO-EEG
	144	RADIONUCLIDE THERAPY
145	145	PHARMACOLOGY/PHYSIOLOGIC NUCLEAR MYOCARDIAL PERFUSION STUDIES
146	146	Positron Emission Tomography (PET)
	149	RADIATION THERAPY TREATMENT
150	150	COMPUTERIZED TOMOGRAPHY (CT)
151	151	MAGNETIC RESONANCE IMAGING (MRI)
152	152	ANGIOGRAM CATHETERIZATION
153	153	INTERVENTIONAL RADIOGRAPHY
538++		PSYCHOLOGICAL TESTING

♦ **Exempt:** This condition is set-up by Health Administration Service (HAS) software when these codes are used without credit pairs that are non-exempt. When the HAS software does not automatically make these exempt, Local VA medical centers can use the “Other” International Classification of Diseases, 9th Edition, Clinical Modification (ICD-9-CM) code.

++ New DSS Identifier

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DSS IDENTIFIER		DESCRIPTION
Ancillary	Exempt ♦	
160	160	CLINICAL PHARMACY
	170	Hospital Based Home Care (HBHC) - PHYSICIAN
212		ELECTROMYOGRAM (EMG)
	421	VASCULAR LABORATORY
423		PROSTHETIC SUPPLY ORDERING SERVICES
	703	MAMMOGRAM
	999	EMPLOYEE HEALTH

NOTE: Caution should be used when pairing exempt DSS identifiers with non-exempt, as the use of these types of pairings could result in rejects being generated when transmitting workload to the Austin Automation Center (AAC).

♦**Exempt:** This condition is set-up by HAS software when these codes are used without credit pairs that are non-exempt. When the HAS software does not automatically make these exempt, Local VA medical centers can use the “Other” ICD-9 CM code.

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ATTACHMENT L

TELEPHONE STOP CODE LIST

NOTE: Work from these stop codes is always non-billable in Veterans Health Administration (VHA) Medical Care Cost Recovery (MCCR) (see Att. M).

DSS ID NUMBER	DSS ID PAIR	DSS ID NAME
103		TELEPHONE TRIAGE
147		TELEPHONE/ANCILLARY
	147209	TELEPHONE Visual Impairment Service Team (VIST)
148		TELEPHONE/DIAGNOSTIC
169		TELEPHONE/CHAPLAIN
178		HBPC/TELEPHONE
181		TELEPHONE/DENTAL
216		TELEPHONE/REHAB AND SUPPORT
	216203	TELEPHONE AUDIOLOGY REHAB SERVICE SUPPORT
	216204	TELEPHONE SPEECH REHAB SUPPORT
324		TELEPHONE/MEDICINE
325		TELEPHONE/NEUROLOGY
326		TELEPHONE/GERIATRICS
424		TELEPHONE/SURGERY
425		TELEPHONE/PROSTHETICS/ORTHOTICS
428		TELEPHONE/OPTOMETRY
527		TELEPHONE/GENERAL PSYCHIATRY
	527564	TELEPHONE Intensive Community Case Management (ICCM)
528+		TELEPHONE/HOMELESS MENTALLY ILL
530+		TELEPHONE/ Department of Housing and Urban Development – VA Shared Housing (HUD-VASH)
536++		TELEPHONE/ Mental Health (MH) VOCATIONAL ASSISTANCE
537++		TELEPHONE/ PSYCHOSOCIAL REHABILITATION
542		TELEPHONE/Post-traumatic Stress Disorder (PTSD)
545		TELEPHONE/SUBSTANCE ABUSE
	545461**	TELEPHONE/SUBSTANCE ABUSE-ALCOHOL DEPENDENCE
	545469**	TELEPHONE SUBSTANCE ABUSE-DRUG DEPENDENCE
546+		TELEPHONE/ Mental Health Intensive Case Management (MHICM)
579+		TELEPHONE/ PSYCHOGERIATRICS
611		TELEPHONE/DIALYSIS
729+		TELEPHONE/DOMICILIARY

+ Changed DSS Identifier description

++ New DSS Identifier

** Amended use of a DSS Identifier

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ATTACHMENT M

ALWAYS NON-BILLABLE DECISION SUPPORT SYSTEM (DSS) IDENTIFIERS

Telephone ♦ ♦		
DSS ID NUMBER	DSS ID PAIR	DSS ID NAME
103		TELEPHONE TRIAGE
147		TELEPHONE/ANCILLARY
148		TELEPHONE/DIAGNOSTIC
169		TELEPHONE/CHAPLAIN
178		Hospital Based Home care (HBHC)/TELEPHONE
179		TELE-HOME CARE TECHNOLOGY UNIT
181		TELEPHONE/DENTAL
	208466	Domiciliary (DOM) Compensated Work Therapy (CWT) (not billable)
	213466	Veterans Education and Training at a Domiciliary (VETS ED/TRNG DOM) (not billable)
216		TELEPHONE/Rehabilitation (REHAB) AND SUPPORT
	216210	SPINAL CORD INJURY TELEPHONE SUPPORT
324		TELEPHONE/MEDICINE
325		TELEPHONE/NEUROLOGY
326		TELEPHONE/GERIATRICS
424		TELEPHONE/SURGERY
425		TELEPHONE/PROSTHETICS/ORTHOTICS
428		TELEPHONE/OPTOMETRY
527		TELEPHONE/GENERAL PSYCHIATRY
528		TELEPHONE/HOMELESS MENTALLY ILL (HMI)
530		TELEPHONE/Department of Housing and Urban Development (HUD) – VA Shared Housing (VASH)
536		TELEPHONE/ Mental Health (MH) VOCATIONAL ASSISTANCE
537		TELEPHONE/PSYCHOSOCIAL REHABILITATION
542		TELEPHONE/Post Traumatic Stress Disorder (PTSD)
545		TELEPHONE/SUBSTANCE ABUSE
546+		TELEPHONE/MHICM
	545461	TELEPHONE SUBSTANCE ABUSE TREATMENT – ALCOHOL DEPENDENCE
	545469	TELEPHONE SUBSTANCE ABUSE TREATMENT – DRUG DEPENDENCE
546		TELEPHONE/Intensive Psychiatric Community Care (IPCC)
579		TELEPHONE/PSYCHOGERIATRICS
611		TELEPHONE/DIALYSIS
	690	TELEMEDICINE
729		TELEPHONE/DOMICILIARY

♦ ♦ Telephone is not billable to the insurance carrier, nor to the veteran for an Outpatient Therapy (OPT) copay; however, if the call results in a new prescription being written, prescription copayment charges are applicable.

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OTHER		
DSS ID NUMBER	DSS ID PAIR	DSS ID NAME
	174202	Home-based Primary Care (HBPC) RECREATION THERAPY
	174205	HBPC PHYSICAL THERAPY
	174206	HBPC OCCUPATIONAL THERAPY
524		SEXUAL TRAUMA COUNSELING
525		WOMEN'S STRESS DISORDER TREATMENT TEAMS
650		CONTRACT NURSING HOME DAYS
651		STATE NURSING HOME DAYS
652		STATE DOMICILIARY HOME DAYS
653		STATE HOSPITAL CARE
680		HOME and/or COMMUNITY HEALTH CARE (HCHC)ASSESSMENT
681		Department of Veterans Affairs (VA)-paid HCHC
682		VA-REFERRALS TO HCHC
	712	HEP C REGISTRY PATIENT
999		EMPLOYEE HEALTH
	999510	Psychology (PSO) - Employee Assistance Program (EAP)
	510474	PSYCHOLOGY RESEARCH

ATTACHMENT N

**SOMETIMES NON-BILLABLE CLINICS WITH THESE STOPS MAY NEED
TO BE SET UP AS “NOT BILLABLE” ON HEALTH ADMINISTRATION
SERVICE (HAS) AUTOBILLER**

SCREENINGS		
DSS ID NUMBER	DSS ID PAIR	DSS ID NAME
120		HEALTH SCREENING
	701	HYPERTENSION SCREENING
	702	CHOLESTEROL SCREENING
	706	ALCOHOL SCREENING
NUTRITION		
123		NUTRITION/DIETETICS/INDIVIDUAL
124		NUTRITION/DIETETICS/GROUP
175		Home Based Primary Care (HBPC) – DIETICIAN
CHAPLAIN		
165		BEREAVEMENT COUNSELING _χ
166		CHAPLAIN SERVICE – INDIVIDUAL _χ
167		CHAPLAIN SERVICE – GROUP _χ
168		CHAPLAIN SERVICE – COLLATERAL _χ
SOCIAL WORK		
125		SOCIAL WORK SERVICE
173		HBPC – SOCIAL WORKER
THERAPY		
174		HBPC – THERAPIST (also 174202, 174206, 174207)
202		RECREATION THERAPY SERVICE
206		OCCUPATIONAL THERAPY
207		Physical Medicine and Rehabilitation Service (PM&RS) INCENTIVE THERAPY
208		PM&RS COMPENSATED WORK THERAPY
574		Mental Health (MH) COMPENSATED WORK THERAPY (CWT) GROUP
	574513	MH CWT/SUBSTANCE ABUSE
PHARMACY		
160		CLINICAL PHARMACY

_χ In general these services are not billed. However, when chaplain professionals provide in-depth substance abuse counseling, co-lead mental health groups, perform specific family, unemployment, or crisis counseling roles, such work may be billable. States vary in their rules regarding reimbursement of clergy health professionals without mental health (non-clergy counseling) certifications. Each Veterans Integrated Service Network (VISN) and Department of Veterans Affairs (VA) medical center will need to find out the rules in the relevant State and bill clinic work for those stops accordingly. As a safety measure, clinics in these stops should all be set as “not billed” and Medical Care Cost Funding Program can review specific care for billable status.

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SCREENINGS		
DSS ID NUMBER	DSS ID PAIR	DSS ID NAME
EDUCATION		
	306117	DIAB DM ED
	604	HOME/SELF HEMODIALYSIS TRAINING TREATMENT
	608	HOME/SELF PERITONEAL DIALYSIS TRAINING
	711	INJURY COUNSEL/SEAT BELT USAGE
	707	SMOKING CESSATION
	708	NUTRITION
OTHER		
	709	PHYSICAL FITNESS/EXERCISE COUNSELING
117		NURSING
	117473	Purified Protein Derivated (PPD) CLINIC (Tuberculosis)
	117710	FLUSHOT ^τ
121		RESIDENTIAL CARE PROGRAM FOLLOW-UP
	710	INFLUENZA IMMUNIZATION ^τ
176		HBPC – CLINICAL PHARMACIST
177		HBPC – OTHER
423		PROSTHETIC SERVICES
	450485	These stop codes are used at the discretion of each facility and may be established for a variety of reasons.
	510474	PSYCHOLOGY RESEARCH
603		LIMITED SELF CARE HEMODIALYSIS TREATMENT
607		LIMITED SELF CARE PERITONEAL DIALYSIS

^τ Not billable if the only reason for attending the clinic was to receive the flu shot. If a flu shot is received in connection with another clinic visit, then the flu shot is billable.

ATTACHMENT O

**FISCAL YEAR 2000 SHORT DESCRIPTION
DECISION SUPPORT SYSTEM (DSS) NATIONAL SUFFIXES FOR USE
WITH DSS IDENTIFIER CREDIT PAIRS AS FEEDER KEYS FOR
DSS INTERMEDIATE PRODUCTS**

CODE	SHORT DESCRIPTION
AETC	AMBULATORY EVALUATION AND TREATMENT CENTER
AFCC	AFC CLINIC
AGTO	AGENT ORANGE
AOTH	A OTHER
ASOR	AMBULATORY SURGERY PERFORMED IN AN OR
ASOT	AMBULATORY SURGERY PERFORMED IN AREA OTHER
ATEM	A TEAM
BARA	BAR 203-450 AUDIO
BOTH	B OTHER
BTEM	B TEAM
CASE	CASE MANAGEMENT
CHOL	CHOLESTEROL EDUCATION - DOUBLE PROVIDER
CMIO	CMI – CHRONICALLY MENTALLY ILL
COLL	COLLATERAL
COMN	COMMUNITY NURSING HOME
CONS	CONSULTATION
COOR	COORDINATOR
COTH	C OTHER
CPEX	COMPENSATION AND PENSION EXAMINATION
CTEM	C TEAM
DIAB	DIABETES EDUCATION
DIAG	DIAGNOSTIC PROCEDURES
DOMI	DOMICILIARY
DOTH	D OTHER
DPGP	DOUBLE PROVIDER - GROUP OF PATIENTS
DPIN	DOUBLE PROVIDER - INDIVIDUAL PATIENT
DPRO	DENTAL PROCEDURE
DTEM	D TEAM
EAPO	EMPLOYEE ASSISTANCE
EDUC	EDUCATION – NON-MD, i.e., non-physician
EOTH	E OTHER
ETEM	E TEAM
EXPX	EXPOSURE RADIATION
FAMI	FAMILY
FCAP	Family Centered Activities (FCA) 205-460 POOL (patient swimming pool)
FLUI	FLU INJECTION
FOLU	FOLLOW-UP
FOST	FOSTER CARE CLINIC
FOTH	F OTHER

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CODE	SHORT DESCRIPTION
FTEM	F TEAM
GIPR	Gastrointestinal (GI) PROCEDURE
GLCM	GLUCOMETER
GMED	MEDIC
GOTH	G OTHER
GTEM	G TEAM
GULF	PERSIAN GULF WAR
HCHV	HCHV IN 501 STOP
HEMP	HEMATOLOGY PROCEDURE
HOME	RESIDENTIAL SCREENING
HOTH	H OTHER
HTEM	H TEAM
INJX	INJECTION
INPT	INPATIENT
INTE	INTERN
INVA	INVASIVE PROCEDURE
IVRX	Intervenous (IV) DRUGS/MEDICATION
KORE	KOREAN WAR
MISC	MISCELLANEOUS PROCEDURE
MNHM	MAIN HEALTH MAINTENANCE
NASS	NURSE ASSISTANT
NPRN	NURSE PRACTITIONER
NURS	NURSE
OFFF	OFF
ONNN	ON
OTHA	OTHER 1
OTHB	OTHER 2
OTHC	OTHER 3
OTHD	OTHER 4
OTHE	OTHER 5
OTHF	OTHER 6
OTHG	OTHER 7
OUTP	OUTPATIENT
PBED	PRE BED CARE
POWO	MEN Prisoner(s) of War (POWS)
POWW	WOMEN POWS
PREV	PREVENTION
PRIA	PRIMARY CARE TEAM 1
PRIB	PRIMARY CARE TEAM 2
PRIC	PRIMARY CARE TEAM 3
PRID	PRIMARY CARE TEAM 4
PRIE	PRIMARY CARE TEAM 5
PROC	PROCEDURE
PROP	PREOPERATIVE
PSYC	PSYCHOLOGIST
REHA	REHABILITATION

CODE	SHORT DESCRIPTION
REPE	REPEAT
RESI	RESIDENTIAL CLINIC
RSCH	RESEARCH ACTIVITIES
RXMN	MEDICATION (SUCH AS COUMADIN) MONITORING
SATA	SATELLITE CLINIC A
SATB	SATELLITE CLINIC B
SCRE	SCREENING
SCVT	SERVICE CONNECTED
SIGO	SINGLE
SOCW	SOCIAL WORKER
SPEC	SPECIAL
SPGP	SINGLE PROVIDER - GROUP OF PATIENTS
SPIN	SINGLE PROVIDER - INDIVIDUAL PATIENT
SSFU	STOP SMOKE FOLLOW-UP - INDIVIDUAL PATIENT
SSGD	STOP SMOKING GROUP DOUBLE PROVIDER
STRU	STRUCTURE LEARNING - GROUP OF PATIENTS
STUD	STUDENT PROVIDER - INDIVIDUAL PATIENT
TDIS	THOUGHT DISORDER - GROUP OF PATIENTS
TECH	TECHNICIAN
TENS	TENS CLINIC IN Physical Medicine and Rehabilitation Service (PM&RS)
TPGP	THREE OR MORE PROVIDERS - GROUP OF PATIENTS
TPIN	THREE OR MORE PROVIDERS - INDIVIDUAL PATIENT
TRAN	PRE- AND POST-TRANSPLANT CLINICAL ACTIVITIES
UNSC	UNSCHEDULED CLINIC
VIET	VIETNAM WAR
WCHR	WHEELCHAIR

ATTACHMENT P

**FISCAL YEAR 2000 NATIONAL ALPHA CODE DESCRIPTION
DECISION SUPPORT SYSTEM (DSS) NATIONAL SUFFIXES FOR USE
WITH DSS IDENTIFIER CREDIT PAIRS AS FEEDER KEYS FOR
DSS INTERMEDIATE PRODUCTS**

CODE	NATL ALPHA CODE DESCRIPTION
AAAA	GENERAL PURPOSE 1
BBBB	GENERAL PURPOSE 2
XXXX	GENERAL PURPOSE 3
YYYY	GENERAL PURPOSE 4
IACT	CLINIC (CLI) FEEDER KEYS INACTIVE PRIOR TO START OF CURRENT PROCESSING YEAR
MDPA	PHYSICIAN ASSISTANT
NONC	NON-COUNT FOR DSS (USUALLY POINT TO STATES BUT USED TO AC6)
OPTC	OPHTHALMOLOGY TECHNICIAN
PHRM	CLINICAL PHARMACY
RECR	RECREATION THERAPY
KTIN	(KT) INDIVIDUAL
KTGR	KT GROUP
MATI	Manual Arts Therapy (MAT) INDIVIDUAL
MATG	MAT GROUP
OTIN	Occupational Therapy (OT) INDIVIDUAL
OTGR	OT GROUP
PTIN	Physical Therapy (PT) INDIVIDUAL
PTGR	PT GROUP
SATP	SUBSTANCE ABUSE TREATMENT PROGRAM
STAT	POINT TO STATISTICS IN DSS
XREC	CLI FEEDER KEYS TRANSMITTED FOR DEMOGRAPHIC INFORMATION TO CREATE MORE COMPLETE ENCOUNTER
ZZZZ	NO LONGER ACTIVE
IOTH	I OTHER
JOTH to	J OTHER
ZOTH	Z OTHER
ITEM	I TEAM
JTEM to	J TEAM
ZTEM	Z TEAM
APRI	A PRIMARY CARE
BPRI to	B PRIMARY CARE

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CODE	NATL ALPHA CODE DESCRIPTION
ZPRI	Z PRIMARY CARE
ASAT	SATELLITE A
BSAT to	SATELLITE B
ZSAT	SATELLITE Z
ACBC	CBC A
BCBC to	CBC B
HCBC	CBC H
ANUR	Registered Nurse (RN) MANAGED CLINIC A
BNUR to	RN MANAGED CLINIC B
HNUR	RN MANAGED CLINIC H
ACPX	Compensation and Pension (C&P) CLINIC PROFILE A
BCPX to	C&P CLINIC PROFILE B
HCPX	C&P CLINIC PROFILE H
ARED	RED TEAM A
BRED to	RED TEAM B
HRED	RED TEAM H
ABLU	BLUE TEAM A
BBLU to	BLUE TEAM B
HBLU	BLUE TEAM H
AYEL	YELLOW TEAM A
BYEL to	YELLOW TEAM B
HYEL	YELLOW TEAM H

ATTACHMENT Q

EVENT CAPTURE AND/OR TEXT INTEGRATION UTILITY (TIU)
MENU TEMPLATE

1. To enhance single-entry, and sign-on functionality for Department of Veterans Affairs (VA) medical centers using Text Integration Utility (TIU) (with Clinic Patient Record System (CPRS) and Event Capture System (ECS) data entry), Decision Support System (DSS)-Troy has provided guidelines on how to set-up a menu template to help you as a provider, set-up a TIU and/or ECS-combined menu so one can go directly from entry of a TIU progress note to entry of an ECS procedure. **NOTE:** *For DSS users, this document is available electronically on the DSS national web site.*

NOTE: *Some sites have expressed a desire to enter Progress Notes for the same patients that they are entering into Event Capture. There are a couple of ways to accomplish this. One, obviously is to evoke each menu option within Event Capture and TIU independently. The other is via the use of a Menu Template.*

2. The following explains generically the steps one can go through to create a Menu Template. A Menu Template in simple terms is a short cut path from one option to another. Because Menu Templates take one through several menu paths, there are a couple of things that one needs to do before this will work. If any of the options one is ultimately going to be using, or will go through in the Menu Template, have a Security Key, then one must have that security key assigned to one. **NOTE:** *Event Capture menu's require the ECALLU Security Key.* For this to work correctly, one needs to have the menus you are going through (and ultimately going to be evoking) as a secondary menu option assigned to you, as well as being on your Primary Menu Option. The facility Information Resource Management Office can assist with the Security Key and assignment of the menu options.

NOTE: *The menu options are likely to be quite different from what is being shown in the example. Because of all the steps one will go through to set up a Menu Template, this has been set to show cause and effect; i.e., what happens when this is done.*

3. User responses in this example are shown bolded and underlined. What the user will see once the Menu Template is created and is actually being used has been provided. Comments to help you see where you are in this example (and what the steps mean) will be noted in bold italics. In this example, you want to be able to Enter/Edit Patient Procedures (Event Capture option) and then enter a Progress Note (TIU option, actual name is Enter of Progress Note).

NOTE: *If you experience difficulty setting this, contact the National Help Desk at 1-888-596-4357. Ask the person who answers the phone to log a NOIS for the Event Capture module. Explain that you are trying to set up a Menu Template and are having problems. For assistance with the TIU options, see the Clinical Coordinator or TIU Coordinator at your facility. A copy of these instructions will be provided to the Customer Support staff for Event Capture as well as to the Bedford Technical Services Help Desk.*

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4. EXAMPLE

Good afternoon WILSON,TEST

You last signed on today at 12:50

ECS Event Capture Menu ...

TIU Progress Notes User Menu ...

Progress Notes/Discharge Summary [TIU] ...

Select LOCAL MENU FOR TRAINING Option: **TBOX User's Toolbox**

Display User Characteristics

Edit User Characteristics

Electronic Signature code Edit

Menu Templates ...

Spooler Menu ...

Switch UCI

TaskMan User

User Help

Select User's Toolbox Option: **MENU Templates**

Create a new menu template

Delete a Menu Template

List all Menu Templates

Rename a menu template

Show all options in a Menu Template

Select Menu Templates Option: **CREATE a new menu template**

Do you want some brief instructions? [Y/N] N// **Y**

Creating a Menu Template

A menu template is a set of menu options that can be called at any menu prompt. This list of options will be executed from the top of the list to the bottom and then the user will be asked if he/she wants to execute that set of options again. Each menu template is stored in the person file with a unique name associated with it. A menu template is evoked by typing a left, square bracket followed by the template name. To create a menu template you will be led step-by-step through your menu trees, selecting an option from each menu presented. No jumping is allowed during the creation of a template because how you got there may be as important as the target option. All templates begin execution with your primary (sign-on) menu.

At the "Select...Option" prompt you may respond by typing:

1. An option from the menu presented to include that option in the template you are creating,
2. '?' to get a brief help message,
3. '??' to get this help message again,
4. '+' to store the template in your Person file, or
5. '^' to abandon the creation process and return to the regular menu system.

Select HELP SYSTEM action or <return>:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Once you've reviewed the help text for creating a menu template, you will see your Primary Menu displayed.

```
ECS  Event Capture Menu ...
TIU  Progress Notes User Menu ...
      Progress Notes/Discharge Summary [TIU] ...
```

Choose one of the LOCAL MENU FOR TRAINING Options: **EVENT Capture Menu**
Begin by selecting the first menu option in the patch. Remember that to get to the Enter/Edit Patient Procedures menu (in this example), you have to go through the menu path.

Event Capture Menu (ECMENU) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE *This is displayed throughout this process and lets you see where you are.*

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

```
MGR  Event Capture Management Menu ...
E    Event Capture Data Entry ...
R    Event Capture Reports ...
O    Event Capture Online Documentation
```

Choose one of the Event Capture Menu Options: **E Event Capture Data Entry** *This is the sub-menu to get the Enter/Edit Patient Procedures option.*

Event Capture Data Entry (ECENTER) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

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Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options: **ENTER/Edit Patient Procedures** *Now I select the Enter/Edit Patient Procedures option. This (in my example) is the only menu option I wish to execute in Event Capture.*

Enter/Edit Patient Procedures (ECPAT) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

I am entering a return here to go up a level, my goal is to get back to the display of my Primary Menu option.

Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Entering a return to continue to go up a level.

Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Entering a return to continue to go up a level.

MGR Event Capture Management Menu ...
E Event Capture Data Entry ...
R Event Capture Reports ...
O Event Capture Online Documentation

Choose one of the Event Capture Menu Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Entered a return to get to this display. Okay, now we're back to the display of my Primary Menu option. Next I want to select the TIU option. The final menu that I will execute in TIU is the Entry of Progress Note option.

ECS Event Capture Menu ...
TIU Progress Notes User Menu ...
Progress Notes/Discharge Summary [TIU] ...

Choose one of the LOCAL MENU FOR TRAINING Options: **PROGRESS NOTES/Discharge Summary [TIU]**

Progress Notes/Discharge Summary [TIU] (TIU MAIN MENU CLINICIAN) This one?
[Y/N] Y// Y

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

1 Progress Notes User Menu ...
2 Discharge Summary User Menu ...
3 Integrated Document Management ...
4 Personal Preferences ...

Choose one of the Progress Notes/Discharge Summary [TIU] Options: **1 Progress Notes User Menu** *This is the menu path I must take to get to the Entry of Progress Notes option.*

Progress Notes User Menu (TIU MAIN MENU PN CLINICIAN) This one? [Y/N] Y// Y

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CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

- 1 Entry of Progress Note
- 2 Review Progress Notes by Patient
- 2b Review Progress Notes
- 3 All MY UNSIGNED Progress Notes
- 4 Show Progress Notes Across Patients
- 5 Progress Notes Print Options ...
- 6 List Notes By Title
- 7 Search by Patient AND Title
- 8 Personal Preferences ...

Choose one of the Progress Notes User Menu Options: **1 Entry of Progress Note** *This is the option that you want to execute, Entry of Progress Notes.*

Entry of Progress Note (TIU ENTER/EDIT PN) This one? [Y/N] Y// Y

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

- 1 Entry of Progress Note
- 2 Review Progress Notes by Patient
- 2b Review Progress Notes
- 3 All MY UNSIGNED Progress Notes
- 4 Show Progress Notes Across Patients
- 5 Progress Notes Print Options ...
- 6 List Notes By Title
- 7 Search by Patient AND Title
- 8 Personal Preferences ...

Choose one of the Progress Notes User Menu Options: ±

Since you've finished putting the desired options in your Menu Template, you enter a plus sign. This will store the Menu Template for future use.

You have chosen the following options in this order:

You will note that all the options and menus are displayed, this is just to show you what options you selected on your journey through the Menu Template.

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LOCAL MENU FOR TRAINING (LOCAL MENU)

Event Capture Menu (ECMENU)

Event Capture Data Entry (ECENTER)

Enter/Edit Patient Procedures (ECPAT)

Event Capture Data Entry (ECENTER)

Event Capture Menu (ECMENU)

LOCAL MENU FOR TRAINING (LOCAL MENU)

Progress Notes/Discharge Summary [TIU] (TIU MAIN MENU CLINICIAN)

Progress Notes User Menu (TIU MAIN MENU PN CLINICIAN)

Entry of Progress Note (TIU ENTER/EDIT PN)

Are we in agreement so far? [Y/N] Y// Y

Fine. Since all menu-type options will be processed in the background you will only be asked to respond to the following:

This means that even though you selected all those options and menus in the setting up of the Menu Template, these are the only two options that you will be seeing once you select your Menu Template.

Enter/Edit Patient Procedures (ECPAT)

Entry of Progress Note (TIU ENTER/EDIT PN)

Are these the functions you want when you invoke this template? [Y/N] Y// Y

Enter a name (6 characters or less in UPPER CASE)

for this template or '^' to quit: **TEST**

'TEST' it is. In the future you will start this template by typing '[TEST'

After you have finished using 'TEST' will you want it to repeat? [Y/N] N// Y *This means that after you've entered a Progress Note (in this example), you can continue on using the Menu Template, you would be taken to the Enter/Edit Patient Procedures option in Event Capture.*

ECS Event Capture Menu ...

TIU Progress Notes User Menu ...

Progress Notes/Discharge Summary [TIU] ...

Select LOCAL MENU FOR TRAINING Option: **[TEST]** *Here's an example of how the Menu Template will work. Don't forget the left bracket*

Loading TEST...

Enter/Edit Patient Procedures *Notice that it takes me to the Enter/Edit Patient Procedures option. You now proceed to enter the Event Capture date for this patient.*

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Event Capture Locations:

1. ALBANY
2. ALBANY OPC
3. HONOLULU OC, HI
4. MURFREESBORO, TN
5. TROY

Select Number: 1

Select DSS Unit: FRIDAY M010

Location: ALBANY

DSS Unit: FRIDAY

Select Patient: WILSON,MIKE 09-02-95 123459872 YES SC VETERAN
SMB SMB

Enter Date and Time of Procedure: NOW// (JAN 20, 1998@12:52) SINUSOIDAL VERTIC
AL AXIS ROTATION (#SP067)

Procedure: SINUSOIDAL VERTICAL AXIS ROTATION (#SP067)

ENTERING A NEW PROCEDURE FOR WILSON,MIKE ...

LOCATION: ALBANY

SERVICE: MEDICINE

SECTION: MEDICINE

CATEGORY: FRI-ONE

PROCEDURE: SINUSOIDAL VERTICAL AXIS ROTATION SP067

VOLUME: 1//

ORDERING SECTION: MEDICINE//

ASSOCIATED CLINIC: TEST

ICD-9 CODE: 401.9 401.9 HYPERTENSION NOS

...OK? Yes// (Yes)

IN/OUTPATIENT: O OUTPATIENT

AGENT ORANGE: N NO

RADIATION EXPOSURE: N NO

ENVIRONMENTAL CONTAMINANTS: N NO

SERVICE CONNECTED: N NO

Provider: WILSON,PATRICIA PLW 162 COMPUTER SPECIALIST

Occupation: Physician Assistant

Provider #2:

Location: ALBANY Service: MEDICINE
Section: MEDICINE DSS Unit: FRIDAY
Patient: WILSON,MIKE Procedure Date: Jan 20, 1998@12:52

1. Category : FRI-ONE WILSON, P
Procedure: SINUSOIDAL VERTICAL AXIS ROTATION (1) MEDICINE

Select a number to edit/delete, or enter N to create a New Procedure:

Location: ALBANY Service: MEDICINE
Section: MEDICINE DSS Unit: FRIDAY
Select Patient:

Once the data has been entered in Event Capture, you are now taken to the option to allow you to Enter a Progress Note (Entry of Progress Note option) in TIU.

--- Clinician's Menu ---

--- Clinician's Progress Notes Menu ---

Entry of Progress Note

Select PATIENT NAME: WILSON,MIKE 09-02-95 123459872 YES SC
VETERAN SMB SMB

TITLE: CRISIS NOTE TITLE

Creating new progress note...

Patient Location: SURGERY
Date/time of Admission: 06/24/97 13:10
Date/time of Note: NOW
Author of Note: WILSON,TEST
...OK? YES//

Calling text editor, please wait...

1>TESTING ECS AND TIU USE VIA MENU TEMPLATES
2>
EDIT Option:

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Saving CRISIS NOTE with changes...

Print this note? No// NO

You may enter another Progress Note. Press RETURN to exit.

Select PATIENT NAME:

Again? Y// Y *If you type a YES here, you will go back to the Event Capture option. If you type a NO here, you will be exited from the Menu Template.*

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ATTACHMENT R

**FISCAL YEAR 2000 HOME AND COMMUNITY HEALTH CARE
DECISION SUPPORT SYSTEM (DSS) STRUCTURE****1. HOME CARE CATEGORIES**

There are four Home Care categories now in the Veterans Health Administration (VHA); they are Home Care provided by:

- a. Department of Veterans Affairs (VA) staff via Home Based Primary Care (HBPC).
- b. VA staff working as Community Health Nursing (CHN) Coordinator or Teams for veterans to get Home and/or Community Health Care (HCHC) provided by vendors, purchased by VA.
- c. Actual visits per month by vendors to veterans for VA-paid HCHC.
- d. Referrals by HCHC staff for veterans to get non-VA paid, as well as, VA-paid HCHC services (days and/or month coverage).

**2. HOME AND COMMUNITY HEALTH CARE DSS DATA COLLECTION
APPROACH**

a. **Background.** VA-paid Home Health Contract referrals is one of the most rapidly growing segments of VA care. The HCHC Offices of VHA Geriatrics and Extended Care, and the VHA Field HCHC Officers requested an automated method for VA-paid, vendor-provided HCHC to be reported in Decision Support System (DSS) by fiscal year (FY) 2000. ***NOTE:** This DSS method was reviewed, by VA medical center HCHC Officers at the National VA HCHC meeting, May 24 through the 26th, 1999. Since that conference, several further refinements were made during National conference calls.*

b. Overall Method for Cost and Workload Capture

(1) **Cost Capture.** For VA-paid, contract HCHC, it has not been possible (until FY 2000) to capture both dollar cost and workload during the month the workload and costs (1358s to Financial Management System (FMS)) are incurred. The fee file is a bill paying tool, not a cost system. Data in the fee file is not comprehensive for all costs, nor is it current to the month the costs and vendor work were incurred. For cost accounting, costs from the VHA cost system, FMS, via 1358 monthly entry, must be combined with work data for the month via the Veterans Health Information System and Technology Architecture (VISTA) software, Event Capture System (ECS).

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(2) **Workload Capture.** The workload for Home Care coordinated by VA medical center teams, is currently divided into two areas (1) HBPC; and (2) VA-paid, vendor-provided, and other. The CHN coordinators for VA-paid and vendor-provided HCHC, track how much veteran home health care is referred to vendors paid by the VA medical center, and to Medicare or other non-VA-paid vendors as well as their own VA medical center staff work to provide assessment and coordination for the veterans.

(a) Home Care Provided By VA HBPC Staff. This workload is captured by HBPC stop codes (170-179). In some cases, more detail is possible via the ECS system. Veterans Integrated Services Network (VISN) 18, Amarillo, has a prototype set of more specific VA Home Health workload products for case managers to use on ECS.

(b) HCHC Provided by VA-paid, vendor-provided care.

1. Types of HCHC workload include care:

a. Provided by the VA medical center's Staff (for assessments, coordination, etc.) i.e., Community and Home Nurse Coordinators, social workers, and others.

b. Provided by VA-paid vendors of HCHC.

c. Referred to Medicare Home Health.

d. Provided by VA referrals to paid by other (non-VA) parties providers.

2. Methods of Tracking Contract HCHC. Various methods can be employed to track HCHC staff referrals to VA-paid, vendor-provided Home Health Care Services and also for non-VA paid, referrals. For example, since Medicare represents about 60 percent of the Little Rock Home Health Care referrals, one can:

a. Put discharge place values on Patient Treatment File (PTF) (for "Inpatient referrals").

b. Use the ECS for HCHC professionals' referrals to enter data with greater specificity.

c. General Method of Handling HCHC Information On DSS. DSS has relational database features which include adhoc structuring of reporting groups for fiscal, and workload information:

(1) **DSS "Contract" Cost Center Reporting.** DSS HCHC VA cost centers have been approved by VHA and VA Chief Financial Officer(s) CFO(s) for each type of VA-paid HCHC (e.g., grouped by skilled vs. non-skilled, etc.). Fiscal data from the Associated Account Level Budgeter Cost Centers (ALBCCs) on DSS also can be rolled up for the entire Home Health program, etc. Much flexibility exists in the DSS reporting capabilities (see subpar. 3b).

(2) **DSS Reporting Capabilities.** DSS Department Cost manager (DCM) department product, volume and mix, and variance reports are available by individual

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department, by sets of departments (e.g., skilled vs. non-skilled) as well as by the entire HCHC Service Line.

NOTE: Both VA-provided and VA-contracted HCHC referrals can be reported on DSS. Custom Summarization, as needed, can be done by the DSS functionality known as Toolkit.

(3) **HCHC Manager DSS Decision Support Objects (DSO) Dashboard (a User-friendly Long-term Set-up).** Several prototype DSOs, or friendly icons for selecting DSS reports, are available as "Dashboards" for HCHC Managers and Teams.

NOTE: One developed by the DSS Site Manager, VISN 12, North Chicago, has all options for cost and workload needed by most managers. Another DSS DSO Dashboard, developed by VISN 7, provides cases cared for as a group, then other reports for provider-specific care tracking. All these DSO reports are updated monthly by the DSS team as a routine upkeep task.

3. DETAIL FOR SETTING UP HOME COMMUNITY HEALTH CARE WORKLOAD CAPTURE

a. At the end of each month, the home and community health care workload will be entered into the system using the generic workload capture package, Event Capture Software. Home and Community Care Coordinators will work with their facility Fiscal Service, including the fiscal accounting and 1358 managers, to provide reports for review and audit to ensure that the end of the month entries are as accurate as possible. The DSS team is required to set-up as many as nine new DSS departments. Fiscal Service will set-up the eight HCHC VA Cost Centers (VACCs), five of which are new in FY 2000. **NOTE:** Accounting sets-up new cost centers on the VA medical center's Integrated Financial Cost Action Program (IFCAP), VACC file, etc. The DSS team needs to ensure the correct costs on FMS are attributed to these eight cost centers.

(1) **Step 1.** Set-up the nine new ECS departments with sets of products for each if they are relevant to work of the VA medical center (see following Table I) and start to capture ECS products.

(2) **Step 2.** Set-up the nine new DSS HCHC DCM departments of the nine possible HCHC departments which are relevant to work done by your VA medical center's VA-Paid, Vendor-Provided, HCHC Serviced, on DCM Master (see following Table I for the selection of HCHC DCM departments and ALBCC).

b. Set-up new HCHC departments relevant to the VA medical center's work (see following Table I), as direct DCM departments.

Table I

DCM Department	Description	Stopcode	ALBCC
1. AØK1	VA-Referrals to HCHC (Statistics Departm	682	Not applicable to Statistics Department

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DCM Department	Description	Stopcode	ALBCC
2. ATQ1	Care provided on behalf of HCHC patients by VA medical center Staff	680	241TQ1
3. ATR1	VA-paid HCHC Aide	681	343TR1
4. ATS1	VA-paid HCHC Skilled Nurse	681	347TS1
5. ATU1	VA-paid HCHC Hospice	681	345TU1
6. ATV1	VA-paid HCHC Infusion Care	681	346TV1
7. ATW1	VA-paid HCHC Mental Health Care	681	348TW1
8. ATX1	VA-paid HCHC Respiratory Care	681	349TX1
9. ATY1	VA-paid HCHC Adult Day Care	681	333TY1

c. Set-up an ALBCC for each of the new DCM departments (see preceding Table I, ALBCC list, right column) except for department AØK1, a Statistics-only department.

NOTE: After setting up the new ALBCCs following the path: ALB/MASTER/CENTERS, be sure that the VCNV E821 SUPPLIES table is updated. Re-map any VACC 8333 and VACC 8343-8349 that are presently being used from their current "exempt" ALBCC to the new ALBCC set up. For example, if VACC 8345 with BOC 2580 is currently being used and is being mapped to the exempt ALBCC 345001, the ALBCC must be changed to the new ALBCC 345TU1. If these are the "first time used" new ALBCCs, check with your accounting department for the BOC that may be used.

d. Set-up appropriate ALB accounts and map them to the appropriate cost types and cost categories in DCM, for the seven contract non-VA-provided care departments; and do the same for the VL1 and VL2 cost categories for ATQ1 (VA-paid Staff Department) as needed.

e. Do a Product Identification (PI) Data Load for PI for all the DCM products relevant to the VA medical center's HCHC products selected for set-up on ECS.

f. Set-up Budgeted Volumes.

g. Set-up appropriate VS and VL RVUs for the products in each department. **NOTE:** Use default RVU (1×10^{-8}) for the AØK1 Statistics-only department products.

h. Run DCM Standards builder jobs when ready overall.

i. Do not allocate Regarding indirect cost allocation, for the vendor-providing departments. Department ATQ1 receives indirect allocation for all medical center-based departments.

4. DEVELOPING PRODUCTS FOR EACH OF THE NEW HCHC DEPARTMENTS

First for ECS (and then for DSS), select the products the VA medical center uses for HCHC from the National lists provided. These are based on the ECS departments as seen in the following Table II, right column.

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TABLE II: ECS PRODUCT SETS TO USE WITH CONTRACT HOME AND COMMUNITY HEALTH CARE DSS DEPARTMENTS/ALBCC

FDR System	ECS Department or FDR Location	Primary Stop Code	DCM (Department or ALBCC)	DSS Department Description	Products
ECS (or Clinic)	ATQ1	680	ATQ1 (241TQ1)	VA HCHC Care billable by VA Staff	VA Staff provided billable product (LIST A)
ECS (or Clinic)	AØP1	147680	204ØP1	HCHC Staff Telephone Patient Contacts	Telephone Consult with Patient HH025 (LIST A1)
ECS	AØK1	682	AØK1	VA-referral HCHC Statistics Care	Start and/or End referral Products (LIST B)
ECS	ATR1	681	ATR1 (343TR1)	VA-paid HCHC Health Aide	Subset (LIST C)
ECS	ATS1	681	ATS1 (347TS1)	VA-paid HCHC Skilled Nurse	Subset (LIST C)
ECS	ATU1	681	ATU1 (345TU1)	VA-paid HCHC Hospice	Subset (LIST C)
ECS	ATV1	681	ATV1 (346TV1)	VA-paid HCHC Infusion Care	Subset (LIST C)
ECS	ATW1	681	ATW1 (348TW1)	VA-paid HCHC Mental Health Care	Subset (LIST C)
ECS	ATX1	681	ATX1 (349TX1)	VA-paid HCHC Respiratory Care	Subset (LIST C)
ECS	ATY1	681	ATY1 (333TY1)	VA-Paid Adult Day Care and other HCHC	Subset (LIST C)

NOTE: See Table III, List C for products for departments ATR1 through ATX 1 and Lists A and A1 for VA medical center staff HCHC products and, List B for HCHC referral statistics products.

5. ADDITIONAL INFORMATION REGARDING HCHC STATISTICS PRODUCTS AND SOURCES

a. **Disposition Place on PTF (at time of Inpatient Discharge).** To collect other information about HCHC referrals specifically from inpatients, including referrals to Medicare-provided HCHC, in FY 2000, three new values for the PTF field Disposition Place have been added. These are listed in Paragraph 6. HCHC VA medical center staff need to be sure that the HCHC referral agency for inpatients referred for HCHC Services is clearly indicated in one of the three new categories in Paragraph 6. **NOTE:** Ask the National CHNC group for information regarding electronic stamps.

b. **New FY 2000 Disposition Place Values for PTF**

- (1) Refer to VA-paid, vendor-provided HCHC.
- (2) Refer Medicare HCHC.
- (3) Refer other agency-paid HCHC.

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c. **Table III LIST A – Suggested New DSS HCHC Products for PCE Reportable Encounters**

(1) **HCHC VA Medical Center Staff Billable Products for DSS Unit Number ATQ1**

FDR SYS	TEMP DEPT	ECS CODE	PRODUCT DESCRIPTION	CPT#	DSS IP#
Reportable to PCE					
ECS	HOM HLTH	HH004	HH SKILLED NURSE VIST 15 MIN	G0154	50876
ECS	HOM HLTH	HH008	HH COMPLAINT RESOLVE	99499	50880
ECS	HOM HLTH	HH009	HH COLLATERAL VISIT	99499	50881
ECS	HOM HLTH	HH010	HH PAT ADVOCACY	99499	50882
ECS	HOM HLTH	HH011	HH RN SUP'VSN HAA HOME VISIT	99499	50883
ECS	HOM HLTH	HH012	HH RN SUP'VN CNH PAT VISIT	99499	50884
ECS	HOM HLTH	HH013	HH OUTPT CONSULT	99499	50885
ECS	HOM HLTH	HH014	HH INPT FOLLOW VISIT	99499	50886
ECS	HOM HLTH	HH015	HH INPT CONSULT	99499	50887
ECS	HOM HLTH	HH016	HH PATIENT EDUCATION	99499	50888
ECS	HOM HLTH	HH017	HH COLLATERAL EDUCATION	99499	50889
ECS	HOM HLTH	HH018	HH CLINICAL SOCIAL WORKER HOME VISIT	G0155	50879

(2) **HCHC LIST A1 – For DSS Unit Number AØP1C**

FDR SYS	TEMP DEPT	ECS CODE	PRODUCT DESCRIPTION	CPT#	DSS IP#
ESC	HOM HLTH	HH025	HH PHONE CONTACT BRIEF	99371	50890
ESC	HOM HLTH	HH026	HH PHONE CONTACT INTERMEDIATE	99372	54076
ECS	HOM HLTH	HH027	HH PHONE CONTACT COMPLEX	99373	54080

d. **Table III: LIST B – Suggested New DSS HCHC Products Not Reportable to PCE** (HCHC Referral Statistics Departments: AØK1)

FDR SYS	TEMP DEPT	ECS CODE	PRODUCT DESCRIPTION	IP NUMBER	CPT#
NOT Reportable to PCE					
ECS	HOM HLTH	HH030	HH REFER-VA PURCH SKILLED	50891	not used
ECS	HOM HLTH	HH031	HH END-VA PURCH SKILLED	50892	not used
ECS	HOM HLTH	HH032	HH REFER-VA PURCH AIDE	50893	not used
ECS	HOM HLTH	HH033	HH END-VA PURCH AIDE	50894	not used

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FDR SYS	TEMP DEPT	ECS CODE	PRODUCT DESCRIPTION	IP NUMBER	CPT#
NOT Reportable to PCE					
ECS	HOM HLTH	HH034	HH REFER VA PURCH HOME MAKER	50895	not used
ECS	HOM HLTH	HH035	HH END-VA PURCH HOME MAKER	50896	not used
ECS	HOM HLTH	HH036	HH REFER-VA PURCH INFUSION	50897	not used
ECS	HOM HLTH	HH037	HH END-VA PURCH INFUSION	50898	not used
ECS	HOM HLTH	HH038	HH REFER-VA PURCH HOSPICE	50899	not used
ECS	HOM HLTH	HH039	HH END-VA PURCH HOSPICE	50900	not used
ECS	HOM HLTH	HH040	HH REFER-VA PD RESPIR CONTRCT	50901	not used
ECS	HOM HLTH	HH041	HH END VA PURCH RESPIRATORY	50902	not used
ECS	HOM HLTH	HH042	HH REFER-VA PURCH MNTL HLTH	50909	not used
ECS	HOM HLTH	HH043	HH END VA PURCH MNTL HLTH	50910	not used
ECS	HOM HLTH	HH044	HH REFER TO MEDICARE	50911	not used
ECS	HOM HLTH	HH045	HH REFER TO VA PD PHYSICAL THPY	50912	not used
ECS	HOM HLTH	HH046	HH REFER TO HOMHLH END VA PD PT	50903	not used
ECS	HOM HLTH	HH047	HH REFER TO VA PD OCCUP THPY	50904	not used
ECS	HOM HLTH	HH048	HH REFER TO END VA PD OT	50905	not used
ECS	HOM HLTH	HH049	HH REFER TO VA PD SPEECH THPY	50906	not used
ECS	HOM HLTH	HH050	HH REFER TO END VA PD SPECH	50907	not used
ECS	HOM HLTH	HH051	HH REFER TO VA PD SOCIAL WK	50908	not used
ECS	HOM HLTH	HH052	HH REFER TO END VA PD SOC WK	50913	not used
ECS	HOM HLTH	HH053	HH REFER TO VA PD HOME HOSPICE	50914	not used
ECS	HOM HLTH	HH054	HH REFER TO END VA PD HOMHSPC	50915	not used
ECS	HOM HLTH	HH055	HH REFER TO VA PD BOWEL AND BLADDER	50916	not used
ECS	HOM HLTH	HH056	HH REFER TO END VA PD BOWEL AND BLADDER	50917	not used
ECS	HOM HLTH	HH057	HH REFER TO VA PD LAB SERVICES	50918	not used
ECS	HOM HLTH	HH058	HH REFER TO END VA PD LAB	50919	not used
ECS	HOM HLTH	HH059	HH REFER - HOME HSPICE MEDICARE	50920	not used
ECS	HOM HLTH	HH060	HH REFER - HOME HSPICE MEDICAID	50921	not used
ECS	HOM HLTH	HH061	HH REFER - HOME HSPICE THIRD PARTY	50922	not used
ECS	HOM HLTH	HH062	HH REFER - HOME HSPICE GRATUS	50923	not used
ECS	HOM HLTH	HH063	HH REFER TO MEDICAID	50924	not used
ECS	HOM HLTH	HH064	HH REFER PUBLIC HEALTH (COUNTY)	50925	not used
ECS	HOM HLTH	HH065	HH REFER THIRD PARTY	50926	not used
ECS	HOM HLTH	HH066	HH REFER TO HMO	50927	not used
ECS	HOM HLTH	HH067	HH REFER TO PRIVATE PAY	50928	not used
ECS	HOM HLTH	HH068	HH REFER RESPITE MEDICARE	50929	not used
ECS	HOM HLTH	HH069	HH REFER RESPITE OTHER	50930	not used
ECS	HOM HLTH	HH070	HH CARE PLAN OVERSIGHT	50931	not used
ECS	HOM HLTH	HH071	HH MEDICAL RECORDS REVIEW	50932	not used
ECS	HOM HLTH	HH072	HH FAMILY SUPPORT ACTIVITIES	50933	not used
ECS	HOM HLTH	HH073	HH MONITORING LAB RESULTS	50934	not used
ECS	HOM HLTH	HH074	HH DISCHARGE DAY MANAGEMENT	50935	not used
ECS	HOM HLTH	HH075	HH ADMIN DETAILS OF REFER COORDIN	50936	not used
ECS	HOM HLTH	HH076	HH REFER TO VA PURCH. PALLIATIVE CARE	50937	not used
ECS	HOM HLTH	HH077	HH END VA PURCH. PALLIATIVE CARE	50938	not used

VHA DIRECTIVE 2000-009**March 3, 2000****e. Table III: LIST C – Suggested New DSS HCHC Products for Number of Visits or Days****Products for DSS Departments: ATR1 – ATX1 (Not for transmission to PCE)**

FDR SYS	ECS CODE	PRODUCT DESCRIPTION	IP NUMBER	CPT#
Number of Contract Visits/Month				
ECS	HH091	HH PURCH VISITS/MO-SKILLED	50393	not used
ECS	HH092	HH PURCH VISITS/MO-AIDE	50940	not used
ECS	HH093	HH PURCH VISITS/MO-INFUSION	50941	not used
ECS	HH094	HH PURCH VISITS/MO-HOSPICE	50942	not used
ECS	HH095	HH PURCH VISITS/MO-RESPIRATORY	50943	not used
ECS	HH096	HH PURCH VISITS/MO-MENT HLTH	50944	not used
ECS	HH097	HH PURCH VISITS/MO-PHYS THPY	50945	not used
ECS	HH098	HH PURCH VISITS/MO-OCCUP THPY	50946	not used
ECS	HH099	HH PURCH VISITS/MO-SPECH THPY	50947	not used
ECS	HH100	HH PURCH VISITS/MO-SOCIAL WK	50948	not used
ECS	HH101	HH PURCH VISITS/MO-HOM HOSPIC	50949	not used
ECS	HH102	HH PURCH VISITS/MO-BOWEL-BLADDER	50950	not used
ECS	HH103	HH PURCH VISITS/MO-LAB SERVICES	50951	not used
ECS	HH104	HH PURCH VISITS/MO-HOMEMAKER	50952	not used
ECS	HH105	HH PURCH VISITS/MO-RESPITE	50953	not used
ECS	HH106	HH PURCH VISITS/MO-PALLIATIVE CRE	50954	not used
ECS	HH107	HH PURCH VISITS/MO-ADULT DAY CARE	50955	not used

6. REQUEST FOR FY 2000 NEW VALUES FOR PTF "DISPOSITION PLACE" FIELD

a. Request the following additions be made to the PTF field Disposition Place. These additions are required to provide information necessary to the management of VA-funded HCHC programs at the medical center, VISN, and VA Central Office levels. Current VISTA and fiscal information systems do not provide, in any centralized way, the workload or cost data necessary to manage home health programs. Additional Cost Centers and DSS Identifiers (stop codes) are also being requested to create the necessary data. The requested new additional Disposition Place Code values are:

- (1) M Refer to VA-paid to HCHC.
- (2) Y Refer to Medicare HCHC.
- (3) Z Refer to other Agency-paid HCHC.

b. Suggest that the definition of the value "P" be changed from HBHC to HBPC.

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c. The complete table would be (suggested changes are bolded):

VALUE TO BE TRANSLATED -----	DESCRIPTION -----
A	NURSING CARE CONT ANOTHER NURS
B	STATE HOME
C	VA DOMICILLARY
D	STATE HOME
F	FOSTER HOME
G	HALFWAY HOUSE
H	BOARDING HOUSE
J	PENAL INSTITUTION
K	RESIDENTIAL HOTEL/RESIDENT
L	OTHER PLACEMENT/UNKNOWN
M	REFER VA-PD TO HOME AND COMMUNITY-BASED CARE
P	HBHC-VACO APP ONLY
R	SPINAL CORD INJURY-VACO APPR.
T	RESPIRE CARE
U	HOSPICE CARE
X	RETURN TO COMMUNITY-INDEPENDEN
Y	REFER MEDICARE HOME AND COMMUNITY-BASED HEALTH CARE
Z	REFER OTHER AGENCY-PD HOME AND COMMUNITY-BASED CARE
0	VA MEDICAL CENTER
1	MILITARY HOSPITAL
2	OTHER FEDERAL HOSPITAL
3	OTHER GOVERNMENT HOSPITAL
4	COMMUNITY HOSPITAL
5	VA NURSING HOME CARE UNIT
7	COMMUNITY NURSING HOME
9	NURSING CARE CONT SAME NURSING

NOTE: These values were added to the Medical Administration Service (MAS) VISTA File and the Austin Automation Center (AAC) – Patient Treatment File (PTF) – National Patient Care (NPC) tables by a PTF patch effective January 1, 2000.

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ATTACHMENT S**FISCAL YEAR 2000 "INTERIM" METHOD FOR CONTRACT COMMUNITY NURSING HOME (CNH), STATE NURSING HOME (SNH), STATE DOMICILIARY HOME (SDH) AND STATE HOSPITAL CARE (SHC) DIRECT DECISION SUPPORT SYSTEM (DSS) WORKLOAD AND COSTS****1. BACKGROUND**

a. The Veterans Health Administration (VHA) non-Department of Veterans Affairs (VA) Workload Task Force of the Decision Support System (DSS) Steering Committee has recommended VA medical centers collect workload and costs for Contract Community Nursing Home (CNH) and State Nursing Homes (SNHs) using the Event Capture System (ECS) in fiscal year (FY) 2000. This Appendix provides the methodology for the "Interim Method" for CNH, SNH, State Domiciliary Home (SDH) and State Hospital Care (SHC) workload collection. To use this CNH Interim Method, workload must be entered into ECS monthly and the costs which are entered into the Financial management system (FMS) monthly by fiscal, should reflect the most accurate estimate for that month, based on the ECS workload reports.

b. This means to run the CNH Interim Method for FY 2000, the following operations process must be in place at the VA medical center. At the end of each month, the VA medical center's CNH coordinator determines which veterans were in which CNH settings for how many days each. The CNH coordinator (usually a nurse or social worker) brings that list (from an ECS Report or, on a special ECS Excel spreadsheet) to the accounting department or Chief Financial Officer (CFO) of the VA medical center. This helps the CFO adjust the 1358s or other mechanisms so the costs reported for that month to FMS most closely reflect the actual VA-contracted activity for the month. The CNH coordinator also enters the data for each CNH patient and each State Home patient into the respective ECS departments, as products. The product is the one assigned by the specific VA medical center to that specific CNH, SNH, or SDH. The ECS product's quantity is the number of days provided to that Social Security Number (SSN) for that month. The specific Coordinator may enter on the most recent score either RUGS II, or RUGS III under the quantity field on ECS with the appropriate ECS statistics product or continue to enter it on the CNH software. Both systems provide extracts to DSS in FY 2000.

c. The ECS data should be entered on, or before, the last day of the calendar month and should include all workload for each SSN incurred during that calendar month. The patient encounter for the CNH workload, as non-VA-patient care, is treated on DSS as an outpatient, even if the case was billed as a Nursing Home care Unit (NHCU) or as an inpatient in another non-VA facility.

d. The structure on ECS and DSS for collecting workload is on the DSS, for CNH, SNH, SDH, and SHC is described on the following Grid I.

e. The non-Health Administration Service (HAS)-count stop code (650, 651, 652 and 653) will serve as the flag on DSS for non-VA care in CNH, SNH, SDH, or SHC respectively.

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NOTE: When the Event Capture Screens are set up for these four new ECS departments: CNH, SNH, SDH, and SHC respectively, one must enter 'AUA (division), AUB (division), AUC (division) respectively, so the Statistical Analysis System (SAS) logic will build encounters for these non-VA care records. Even if a social worker (W) or a nurse (U) is the CNH Coordinator, it is critical that one use 'A' in the first character of the DSS Department code for these four departments. This "A" is entered first in the ECS field, "DSS Unit Number" when the ECS department is set up.

Grid I – ECS and/or DSS Structure for Capturing Contract CNH, SNH, SDH Workload

Description ECS Department	FDR System	ECS Field "DSS Unit #"	DSS Department	DSS Description	ALBCC	DSS Products	DSS only Stop code
Contract CNH Days	ECS or CNH- PAI	AUA1	AUA1	Contract CNH-no cost product	342UA1	List A: Contract CNH bed days plus the RUGS II or RUGS III plus score as quantity	Stop code 650: not- HAS count
SNH Days	ECS	AUB1	AUB1	SNH	341UB1	List B: Plus the RUGS II or III as available	Stop code 651: not- HAS count
SDH Days	ECS	AUC1	AUC1	SDH	331UC1	List C: Plus the RUGS II or III plus overall score	Stop code 652: not- HAS count
SHC	ECS	AUD1	AUD1	SHC	332UD1	List D: Plus the DRG if available	Stop code 653: not HAS count
VA Full-time Employee (FTE) Time and/or products per SSN	Clinic and ECS	ATE1	ATE1 (or WTE1) or UTE1	Nurse or social worker working hand on CNH patients	241TE1 or 221TE1	Patient care Encounter (PCE) (or ECS if used) <i>This is part of overall upkeep of these contract and/or state NHCU patients.</i>	Stop code 119

2. METHOD

NOTE: To minimize customer data entry time, the BTSO is currently developing a method to expedite data entry by transferring monthly a spreadsheet directly to the ECS files.

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a. **Steps to Collect Workload.** Steps to collect FY 2000 CNH, SNH, SDH, and SHC workload on DSS, as part of CNH FY 2000 Workload Capture, using the ECS.

(1) Set up four ECS departments. Enter the following designations for these departments in the ECS field "DSS Unit Number," when setting these up.

AUA1 - CNH

AUB1 - SNH

AUC1 - SDH

AUD1 -SHC

NOTE: Enter, in the field "DSS Unit Number," the first four characters of the Department Cost Manager (DCM) department. These first four characters are critical, so enter on the ECS "DSS Unit," unit setup, so this work can be specially-handled by the DSS Statistical Analysis System (SAS) ECS in Austin Automation Center (AAC) so that proper ECS-based encounters are developed. Use the correct VA Cost Center, for each of the new ECS departments.

(2) Set up the ECS products for the following List A, List B, List C, and List D, respectively in ECS DSS units AUA1, AUB1, AUC1, and AUD1 respectively.

(3) Complete ECS department and/or product set up. ***NOTE:*** None of these ECS departments should be set to go to PCE. This is not PCE workload. It is specific, vendor-provided non-VA CNH Care.

(4) Ensure there is a RUGS II and a RUGS III product as products in each of the ECS non-VA Nursing Home Care departments: the CNH and SNH ECS departments, in addition to the days of care products. ***NOTE:*** *Sometimes this RUGS information is available.*

b. **Set-up on DSS**

(1) **Set-up Four new DCM Departments.** On DCM Master put in four new DSS departments AUA1, AUB1, AUC1, AUD1.

(2) **Set up four new ALBCC.** On ALBCC Master enter the ALBCC counter parts to these four new DSS departments:

342UA1 (CNH); 341UB1 (SNH); 331UC1 (SDH) and 332UD1 (SHC)

(3) **Finish Account Level Budgeter (ALB), DCM Interfaces, and Cost-category Types, etc.** Continue to make the ALB accounts and interfaces needed; and identify the cost types and categories needed on DCM Master Cost for these departments. This refers to contract nursing home administrator which could be a nurse (VL2) or social worker (VL1).

(4) **Set up New Products by Template Match.** For each of the four new DCM departments, set up the products designated for each. Use a template-product identification

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(PI) from FY 2000 DSS Template departments CNH, SNH, SDH, and SHC respectively. Select from these templated products for all of the unique names and/or types of CNH, SNH, SDH, and SHC respectively which the VA medical center currently sends veterans to, plus add two or three more for ones which may start in mid-year. Set the volume for these as 12 per year to start with, and the RVUs of basic average rate only. For the CNH only, include the 10 additional acuity cost products.

(5) Set up RVUs

(a) If the rates for all patients in the nursing home are within a close range:

1. By reviewing the number of clients with each RUG value in each CNH (or SNH), one can volume-weight the RVU for the variable supply cost of product for each CNH (or SNH).

2. The bulk of the costs for CNH, SNH, SDH and SHC are from the respective 300 series cost center and BOCs of each. RVUs per CNH should reflect the cost per CNH of actual bills paid over time.

(b) If a wide range > \$100 between different products occurs (for some VA medical center's CNHs). If the VA medical center pays CNH rates on a variable scale for different levels of care, and the differences are larger >\$25 from baseline (lowest cost rate), then one can enter two ECS products, one for the CNH (or SNH) bedday (at the basic rate) and one for the additional "Acuity," "add-on cost" for the higher levels of care.

(c) For SHC, use the DRG value recorded to approximate RVU value.

(d) RVUs for Labor. Most of the VL workload for CNH care by VA staff is collected in department WTE1 (or UTE1) stop code 119, but if you decide to map a small amount of VL1; (for SW), (or VL2 for RN) for the CNH coordinator's time entering data on ECS per month, providing information to fiscal and reviewing ECS and DSS reports, that is fine if it is appropriate (and be sure a small amount of VL dollars for cost budgeting are mapped). Otherwise all the VL is in WTE1 (or UTE1).

3. INDIRECT COSTS

Since CNH, SNH, SDH, and SHC are provided to veterans off-campus from the VA medical center campus, the indirect costs incurred should be small. Do not map any indirect costs to these departments.

4. PRODUCT LISTS FOR THE NEW ECS DEPARTMENTS

Contents of the following lists are:

- a. List A – Contract CNH ECS Products.
- b. List B – SNH ECS Products.
- c. List C – SDH ECS Products.
- d. List D – SHC ECS Products.

(1) LIST A – CONTRACT CNH ECS PRODUCTS

FDR System = ECS
Stop Code = 650

FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	CNH	CN001	Bedday Comm Nur Home 001	BdDyCNH001		not used
ECS	CNH	CN002	Bedday Comm Nur Home 002	BdDyCNH002		not used
ECS	CNH	CN003	Bedday Comm Nur Home 003	BdDyCNH003		not used
ECS	CNH	CN004	Bedday Comm Nur Home 004	BdDyCNH004		not used
ECS	CNH	CN005	Bedday Comm Nur Home 005	BdDyCNH005		not used
ECS	CNH	CN006	Bedday Comm Nur Home 006	BdDyCNH006		not used
ECS	CNH	CN007	Bedday Comm Nur Home 007	BdDyCNH007		not used
ECS	CNH	CN008	Bedday Comm Nur Home 008	BdDyCNH008		not used
ECS	CNH	CN009	Bedday Comm Nur Home 009	BdDyCNH009		not used
ECS	CNH	CN010	Bedday Comm Nur Home 010	BdDyCNH010		not used
ECS	CNH	CN011	Bedday Comm Nur Home 011	BdDyCNH011		not used
ECS	CNH	CN012	Bedday Comm Nur Home 012	BdDyCNH012		not used
ECS	CNH	CN013	Bedday Comm Nur Home 013	BdDyCNH013		not used
ECS	CNH	CN014	Bedday Comm Nur Home 014	BdDyCNH014		not used
ECS	CNH	CN015	Bedday Comm Nur Home 015	BdDyCNH015		not used
ECS	CNH	CN016	Bedday Comm Nur Home 016	BdDyCNH016		not used
ECS	CNH	CN017	Bedday Comm Nur Home 017	BdDyCNH017		not used
ECS	CNH	CN018	Bedday Comm Nur Home 018	BdDyCNH018		not used
ECS	CNH	CN019	Bedday Comm Nur Home 019	BdDyCNH019		not used
ECS	CNH	CN020	Bedday Comm Nur Home 020	BdDyCNH020		not used
ECS	CNH	CN021	Bedday Comm Nur Home 021	BdDyCNH021		not used
ECS	CNH	CN022	Bedday Comm Nur Home 022	BdDyCNH022		not used
ECS	CNH	CN023	Bedday Comm Nur Home 023	BdDyCNH023		not used
ECS	CNH	CN024	Bedday Comm Nur Home 024	BdDyCNH024		not used
ECS	CNH	CN025	Bedday Comm Nur Home 025	BdDyCNH025		not used
ECS	CNH	CN026	Bedday Comm Nur Home 026	BdDyCNH026		not used
ECS	CNH	CN027	Bedday Comm Nur Home 027	BdDyCNH027		not used
ECS	CNH	CN028	Bedday Comm Nur Home 028	BdDyCNH028		not used
ECS	CNH	CN029	Bedday Comm Nur Home 029	BdDyCNH029		not used
ECS	CNH	CN030	Bedday Comm Nur Home 030	BdDyCNH030		not used
ECS	CNH	CN031	Bedday Comm Nur Home 031	BdDyCNH031		not used
ECS	CNH	CN032	Bedday Comm Nur Home 032	BdDyCNH032		not used
ECS	CNH	CN033	Bedday Comm Nur Home 033	BdDyCNH033		not used
ECS	CNH	CN034	Bedday Comm Nur Home 034	BdDyCNH034		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	CNH	CN035	Bedday Comm Nur Home 035	BdDyCNH036		not used
ECS	CNH	CN036	Bedday Comm Nur Home 036	BdDyCNH037		not used
ECS	CNH	CN037	Bedday Comm Nur Home 037	BdDyCNH037		not used
ECS	CNH	CN038	Bedday Comm Nur Home 038	BdDyCNH038		not used
ECS	CNH	CN039	Bedday Comm Nur Home 039	BdDyCNH039		not used
ECS	CNH	CN040	Bedday Comm Nur Home 040	BdDyCNH040		not used
ECS	CNH	CN041	Bedday Comm Nur Home 041	BdDyCNH041		not used
ECS	CNH	CN042	Bedday Comm Nur Home 042	BdDyCNH042		not used
ECS	CNH	CN043	Bedday Comm Nur Home 043	BdDyCNH043		not used
ECS	CNH	CN044	Bedday Comm Nur Home 044	BdDyCNH044		not used
ECS	CNH	CN045	Bedday Comm Nur Home 045	BdDyCNH045		not used
ECS	CNH	CN046	Bedday Comm Nur Home 046	BdDyCNH046		not used
ECS	CNH	CN047	Bedday Comm Nur Home 047	BdDyCNH047		not used
ECS	CNH	CN048	Bedday Comm Nur Home 048	BdDyCNH048		not used
ECS	CNH	CN049	Bedday Comm Nur Home 049	BdDyCNH049		not used
ECS	CNH	CN050	Bedday Comm Nur Home 050	BdDyCNH050		not used
ECS	CNH	CN051	Bedday Comm Nur Home 051	BdDyCNH051		not used
ECS	CNH	CN052	Bedday Comm Nur Home 052	BdDyCNH052		not used
ECS	CNH	CN053	Bedday Comm Nur Home 053	BdDyCNH053		not used
ECS	CNH	CN054	Bedday Comm Nur Home 054	BdDyCNH054		not used
ECS	CNH	CN055	Bedday Comm Nur Home 055	BdDyCNH055		not used
ECS	CNH	CN056	Bedday Comm Nur Home 056	BdDyCNH056		not used
ECS	CNH	CN057	Bedday Comm Nur Home 057	BdDyCNH057		not used
ECS	CNH	CN058	Bedday Comm Nur Home 058	BdDyCNH058		not used
ECS	CNH	CN059	Bedday Comm Nur Home 059	BdDyCNH059		not used
ECS	CNH	CN060	Bedday Comm Nur Home 060	BdDyCNH060		not used
ECS	CNH	CN061	Bedday Comm Nur Home 061	BdDyCNH061		not used
ECS	CNH	CN062	Bedday Comm Nur Home 062	BdDyCNH062		not used
ECS	CNH	CN063	Bedday Comm Nur Home 063	BdDyCNH063		not used
ECS	CNH	CN064	Bedday Comm Nur Home 064	BdDyCNH064		not used
ECS	CNH	CN065	Bedday Comm Nur Home 065	BdDyCNH065		not used
ECS	CNH	CN066	Bedday Comm Nur Home 066	BdDyCNH066		not used
ECS	CNH	CN067	Bedday Comm Nur Home 067	BdDyCNH067		not used
ECS	CNH	CN068	Bedday Comm Nur Home 068	BdDyCNH068		not used
ECS	CNH	CN069	Bedday Comm Nur Home 069	BdDyCNH069		not used
ECS	CNH	CN070	Bedday Comm Nur Home 070	BdDyCNH070		not used
ECS	CNH	CN071	Bedday Comm Nur Home 071	BdDyCNH071		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	CNH	CN072	Bedday Comm Nur Home 072	BdDyCNH072		not used
ECS	CNH	CN073	Bedday Comm Nur Home 073	BdDyCNH073		not used
ECS	CNH	CN074	Bedday Comm Nur Home 074	BdDyCNH074		not used
ECS	CNH	CN075	Bedday Comm Nur Home 075	BdDyCNH075		not used
ECS	CNH	CN076	Bedday Comm Nur Home 076	BdDyCNH076		not used
ECS	CNH	CN077	Bedday Comm Nur Home 077	BdDyCNH077		not used
ECS	CNH	CN078	Bedday Comm Nur Home 078	BdDyCNH078		not used
ECS	CNH	CN079	Bedday Comm Nur Home 079	BdDyCNH079		not used
ECS	CNH	CN080	Bedday Comm Nur Home 080	BdDyCNH080		not used
ECS	CNH	CN081	Bedday Comm Nur Home 081	BdDyCNH081		not used
ECS	CNH	CN082	Bedday Comm Nur Home 082	BdDyCNH082		not used
ECS	CNH	CN083	Bedday Comm Nur Home 083	BdDyCNH083		not used
ECS	CNH	CN084	Bedday Comm Nur Home 084	BdDyCNH084		not used
ECS	CNH	CN085	Bedday Comm Nur Home 085	BdDyCNH085		not used
ECS	CNH	CN086	Bedday Comm Nur Home 086	BdDyCNH086		not used
ECS	CNH	CN087	Bedday Comm Nur Home 087	BdDyCNH087		not used
ECS	CNH	CN088	Bedday Comm Nur Home 088	BdDyCNH088		not used
ECS	CNH	CN089	Bedday Comm Nur Home 089	BdDyCNH089		not used
ECS	CNH	CN090	Bedday Comm Nur Home 090	BdDyCNH090		not used
ECS	CNH	CN091	Bedday Comm Nur Home 091	BdDyCNH091		not used
ECS	CNH	CN092	Bedday Comm Nur Home 092	BdDyCNH092		not used
ECS	CNH	CN093	Bedday Comm Nur Home 093	BdDyCNH093		not used
ECS	CNH	CN094	Bedday Comm Nur Home 094	BdDyCNH094		not used
ECS	CNH	CN095	Bedday Comm Nur Home 095	BdDyCNH095		not used
ECS	CNH	CN096	Bedday Comm Nur Home 096	BdDyCNH096		not used
ECS	CNH	CN097	Bedday Comm Nur Home 097	BdDyCNH097		not used
ECS	CNH	CN098	Bedday Comm Nur Home 098	BdDyCNH098		not used
ECS	CNH	CN099	Bedday Comm Nur Home 099	BdDyCNH099		not used
ECS	CNH	CN100	Bedday Comm Nur Home 100	BdDyCNH100		not used
ECS	CNH	CN101	CN 0-25 Care Level Addon	AD 0-25		not used
ECS	CNH	CN102	CN 26-50 Care Level Addon	AD 26-50		not used
ECS	CNH	CN103	CN 51-75 Care Level Addon	AD 51-75		not used
ECS	CNH	CN104	CN 76-100Care Level Addon	AD 76-100		not used
ECS	CNH	CN105	CN 101-199 Care Level Addon	AD 101-199		not used
ECS	CNH	CN106	CN 200-299 Care Level Addon	AD 200-299		not used
ECS	CNH	CN107	CN 300-499 Care Level Addon	AD 300-499		not used
ECS	CNH	CN108	CN 500-599 Care Level Addon	AD 500-599		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	CNH	CN109	CN >600 Care Level Addon	AD >600		not used
ECS	CNH	CN110	CN RUGS II	RUGS II		not used
ECS	CNH	CN111	CN RUGS III	RUGS III		not used
ECS	CNH	CN112	Bedday Comm Nur Home 112	BdDyCNH112		not used
ECS	CNH	CN113	Bedday Comm Nur Home 113	BdDyCNH113		not used
ECS	CNH	CN114	Bedday Comm Nur Home 114	BdDyCNH114		not used
ECS	CNH	CN115	Bedday Comm Nur Home 115	BdDyCNH115		not used
ECS	CNH	CN116	Bedday Comm Nur Home 116	BdDyCNH116		not used
ECS	CNH	CN117	Bedday Comm Nur Home 117	BdDyCNH117		not used
ECS	CNH	CN118	Bedday Comm Nur Home 118	BdDyCNH118		not used
ECS	CNH	CN119	Bedday Comm Nur Home 119	BdDyCNH119		not used
ECS	CNH	CN120	Bedday Comm Nur Home 120	BdDyCNH120		not used
ECS	CNH	CN121	Bedday Comm Nur Home 121	BdDyCNH121		not used
ECS	CNH	CN122	Bedday Comm Nur Home 122	BdDyCNH122		not used
ECS	CNH	CN123	Bedday Comm Nur Home 123	BdDyCNH123		not used
ECS	CNH	CN124	Bedday Comm Nur Home 124	BdDyCNH124		not used
ECS	CNH	CN125	Bedday Comm Nur Home 125	BdDyCNH125		not used
ECS	CNH	CN126	Bedday Comm Nur Home 126	BdDyCNH126		not used
ECS	CNH	CN127	Bedday Comm Nur Home 127	BdDyCNH127		not used
ECS	CNH	CN128	Bedday Comm Nur Home 128	BdDyCNH128		not used
ECS	CNH	CN129	Bedday Comm Nur Home 129	BdDyCNH129		not used
ECS	CNH	CN130	Bedday Comm Nur Home 130	BdDyCNH130		not used
ECS	CNH	CN131	Bedday Comm Nur Home 131	BdDyCNH131		not used
ECS	CNH	CN132	Bedday Comm Nur Home 132	BdDyCNH132		not used
ECS	CNH	CN133	Bedday Comm Nur Home 133	BdDyCNH133		not used
ECS	CNH	CN134	Bedday Comm Nur Home 134	BdDyCNH134		not used
ECS	CNH	CN135	Bedday Comm Nur Home 135	BdDyCNH135		not used
ECS	CNH	CN136	Bedday Comm Nur Home 136	BdDyCNH136		not used
ECS	CNH	CN137	Bedday Comm Nur Home 137	BdDyCNH137		not used
ECS	CNH	CN138	Bedday Comm Nur Home 138	BdDyCNH138		not used
ECS	CNH	CN139	Bedday Comm Nur Home 139	BdDyCNH139		not used
ECS	CNH	CN140	Bedday Comm Nur Home 140	BdDyCNH140		not used
ECS	CNH	CN141	Bedday Comm Nur Home 141	BdDyCNH141		not used
ECS	CNH	CN142	Bedday Comm Nur Home 142	BdDyCNH142		not used
ECS	CNH	CN143	Bedday Comm Nur Home 143	BdDyCNH143		not used
ECS	CNH	CN144	Bedday Comm Nur Home 144	BdDyCNH144		not used
ECS	CNH	CN145	Bedday Comm Nur Home 145	BdDyCNH145		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	CNH	CN146	Bedday Comm Nur Home 146	BdDyCNH146		not used
ECS	CNH	CN147	Bedday Comm Nur Home 147	BdDyCNH147		not used
ECS	CNH	CN148	Bedday Comm Nur Home 148	BdDyCNH148		not used
ECS	CNH	CN149	Bedday Comm Nur Home 149	BdDyCNH149		not used
ECS	CNH	CN150	Bedday Comm Nur Home 150	BdDyCNH150		not used
ECS	CNH	CN151	Bedday Comm Nur Home 151	BdDyCNH151		not used
ECS	CNH	CN152	Bedday Comm Nur Home 152	BdDyCNH152		not used
ECS	CNH	CN153	Bedday Comm Nur Home 153	BdDyCNH153		not used
ECS	CNH	CN154	Bedday Comm Nur Home 154	BdDyCNH154		not used
ECS	CNH	CN155	Bedday Comm Nur Home 155	BdDyCNH155		not used
ECS	CNH	CN156	Bedday Comm Nur Home 156	BdDyCNH156		not used
ECS	CNH	CN157	Bedday Comm Nur Home 157	BdDyCNH157		not used
ECS	CNH	CN158	Bedday Comm Nur Home 158	BdDyCNH158		not used
ECS	CNH	CN159	Bedday Comm Nur Home 159	BdDyCNH159		not used
ECS	CNH	CN160	Bedday Comm Nur Home 160	BdDyCNH160		not used
ECS	CNH	CN161	Bedday Comm Nur Home 161	BdDyCNH161		not used
ECS	CNH	CN162	Bedday Comm Nur Home 162	BdDyCNH162		not used
ECS	CNH	CN163	Bedday Comm Nur Home 163	BdDyCNH163		not used
ECS	CNH	CN164	Bedday Comm Nur Home 164	BdDyCNH164		not used
ECS	CNH	CN165	Bedday Comm Nur Home 165	BdDyCNH165		not used
ECS	CNH	CN166	Bedday Comm Nur Home 166	BdDyCNH166		not used
ECS	CNH	CN167	Bedday Comm Nur Home 167	BdDyCNH167		not used
ECS	CNH	CN168	Bedday Comm Nur Home 168	BdDyCNH168		not used
ECS	CNH	CN169	Bedday Comm Nur Home 169	BdDyCNH169		not used
ECS	CNH	CN170	Bedday Comm Nur Home 170	BdDyCNH170		not used
ECS	CNH	CN171	Bedday Comm Nur Home 171	BdDyCNH171		not used
ECS	CNH	CN172	Bedday Comm Nur Home 172	BdDyCNH172		not used
ECS	CNH	CN173	Bedday Comm Nur Home 173	BdDyCNH173		not used
ECS	CNH	CN174	Bedday Comm Nur Home 174	BdDyCNH174		not used
ECS	CNH	CN175	Bedday Comm Nur Home 175	BdDyCNH175		not used
ECS	CNH	CN176	Bedday Comm Nur Home 176	BdDyCNH176		not used
ECS	CNH	CN177	Bedday Comm Nur Home 177	BdDyCNH177		not used
ECS	CNH	CN178	Bedday Comm Nur Home 178	BdDyCNH178		not used
ECS	CNH	CN179	Bedday Comm Nur Home 179	BdDyCNH179		not used
ECS	CNH	CN180	Bedday Comm Nur Home 180	BdDyCNH180		not used
ECS	CNH	CN181	Bedday Comm Nur Home 181	BdDyCNH181		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	CNH	CN182	Bedday Comm Nur Home 182	BdDyCNH182		not used
ECS	CNH	CN183	Bedday Comm Nur Home 183	BdDyCNH183		not used
ECS	CNH	CN184	Bedday Comm Nur Home 184	BdDyCNH184		not used
ECS	CNH	CN185	Bedday Comm Nur Home 185	BdDyCNH185		not used
ECS	CNH	CN186	Bedday Comm Nur Home 186	BdDyCNH186		not used
ECS	CNH	CN187	Bedday Comm Nur Home 187	BdDyCNH187		not used
ECS	CNH	CN188	Bedday Comm Nur Home 188	BdDyCNH188		not used
ECS	CNH	CN189	Bedday Comm Nur Home 189	BdDyCNH189		not used
ECS	CNH	CN190	Bedday Comm Nur Home 190	BdDyCNH190		not used
ECS	CNH	CN191	Bedday Comm Nur Home 191	BdDyCNH191		not used
ECS	CNH	CN192	Bedday Comm Nur Home 192	BdDyCNH192		not used
ECS	CNH	CN193	Bedday Comm Nur Home 193	BdDyCNH193		not used
ECS	CNH	CN194	Bedday Comm Nur Home 194	BdDyCNH194		not used
ECS	CNH	CN195	Bedday Comm Nur Home 195	BdDyCNH195		not used
ECS	CNH	CN196	Bedday Comm Nur Home 196	BdDyCNH196		not used
ECS	CNH	CN197	Bedday Comm Nur Home 197	BdDyCNH197		not used
ECS	CNH	CN198	Bedday Comm Nur Home 198	BdDyCNH198		not used
ECS	CNH	CN199	Bedday Comm Nur Home 199	BdDyCNH199		not used
ECS	CNH	CN200	Bedday Comm Nur Home 200	BdDyCNH200		not used
ECS	CNH	CN201	Bedday Comm Nur Home 201	BdDyCNH201		not used
ECS	CNH	CN202	Bedday Comm Nur Home 202	BdDyCNH202		not used
ECS	CNH	CN203	Bedday Comm Nur Home 203	BdDyCNH203		not used
ECS	CNH	CN204	Bedday Comm Nur Home 204	BdDyCNH204		not used
ECS	CNH	CN205	Bedday Comm Nur Home 205	BdDyCNH205		not used
ECS	CNH	CN206	Bedday Comm Nur Home 206	BdDyCNH206		not used
ECS	CNH	CN207	Bedday Comm Nur Home 207	BdDyCNH207		not used
ECS	CNH	CN208	Bedday Comm Nur Home 208	BdDyCNH208		not used
ECS	CNH	CN209	Bedday Comm Nur Home 209	BdDyCNH209		not used
ECS	CNH	CN210	Bedday Comm Nur Home 210	BdDyCNH210		not used
ECS	CNH	CN211	Bedday Comm Nur Home 211	BdDyCNH211		not used

(2) LIST B – STATE NURSING HOME ECS PRODUCTS

FDR SYS = ECS

Stop Code = 651

FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	SNH	SN001	Bedday State Home 001	BdDySN001		not used
ECS	SNH	SN002	Bedday State Home 002	BdDySN002		not used
ECS	SNH	SN003	Bedday State Home 003	BdDySN003		not used
ECS	SNH	SN004	Bedday State Home 004	BdDySN004		not used
ECS	SNH	SN005	Bedday State Home 005	BdDySN005		not used
ECS	SNH	SN006	Bedday State Home 006	BdDySN006		not used
ECS	SNH	SN007	Bedday State Home 007	BdDySN007		not used
ECS	SNH	SN008	Bedday State Home 008	BdDySN008		not used
ECS	SNH	SN009	Bedday State Home 009	BdDySN009		not used
ECS	SNH	SN010	Bedday State Home 010	BdDySN010		not used
ECS	SNH	SN011	Bedday State Home 011	BdDySN011		not used
ECS	SNH	SN012	Bedday State Home 012	BdDySN012		not used
ECS	SNH	SN013	Bedday State Home 013	BdDySN013		not used
ECS	SNH	SN014	Bedday State Home 014	BdDySN014		not used
ECS	SNH	SN015	Bedday State Home 015	BdDySN015		not used
ECS	SNH	SN016	Bedday State Home 016	BdDySN016		not used
ECS	SNH	SN017	Bedday State Home 017	BdDySN017		not used
ECS	SNH	SN018	Bedday State Home 018	BdDySN018		not used
ECS	SNH	SN019	Bedday State Home 019	BdDySN019		not used
ECS	SNH	SN020	Bedday State Home 020	BdDySN020		not used
ECS	SNH	SN021	Bedday State Home 021	BdDySN021		not used
ECS	SNH	SN022	Bedday State Home 022	BdDySN022		not used
ECS	SNH	SN023	Bedday State Home 023	BdDySN023		not used
ECS	SNH	SN024	Bedday State Home 024	BdDySN024		not used
ECS	SNH	SN025	Bedday State Home 025	BdDySN025		not used
ECS	SNH	SN026	Bedday State Home 026	BdDySN026		not used
ECS	SNH	SN027	Bedday State Home 027	BdDySN027		not used
ECS	SNH	SN028	Bedday State Home 028	BdDySN028		not used
ECS	SNH	SN029	Bedday State Home 029	BdDySN029		not used
ECS	SNH	SN030	Bedday State Home 030	BdDySN030		not used
ECS	SNH	SN031	Bedday State Home 031	BdDySN031		not used
ECS	SNH	SN032	Bedday State Home 032	BdDySN032		not used
ECS	SNH	SN033	Bedday State Home 033	BdDySN033		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	SNH	SN034	Bedday State Home 034	BdDySN034		not used
ECS	SNH	SN035	Bedday State Home 035	BdDySN035		not used
ECS	SNH	SN036	Bedday State Home 036	BdDySN036		not used
ECS	SNH	SN037	Bedday State Home 037	BdDySN037		not used
ECS	SNH	SN038	Bedday State Home 038	BdDySN038		not used
ECS	SNH	SN039	Bedday State Home 039	BdDySN039		not used
ECS	SNH	SN040	Bedday State Home 040	BdDySN040		not used
ECS	SNH	SN041	Bedday State Home 041	BdDySN041		not used
ECS	SNH	SN042	Bedday State Home 042	BdDySN042		not used
ECS	SNH	SN043	Bedday State Home 043	BdDySN043		not used
ECS	SNH	SN044	Bedday State Home 044	BdDySN044		not used
ECS	SNH	SN045	Bedday State Home 045	BdDySN045		not used
ECS	SNH	SN046	Bedday State Home 046	BdDySN046		not used
ECS	SNH	SN047	Bedday State Home 047	BdDySN047		not used
ECS	SNH	SN048	Bedday State Home 048	BdDySN048		not used
ECS	SNH	SN049	Bedday State Home 049	BdDySN049		not used
ECS	SNH	SN050	Bedday State Home 050	BdDySN050		not used
ECS	SNH	SN051	Bedday State Home 051	BdDySN051		not used
ECS	SNH	SN052	Bedday State Home 052	BdDySN052		not used
ECS	SNH	SN053	Bedday State Home 053	BdDySN053		not used
ECS	SNH	SN054	Bedday State Home 054	BdDySN054		not used
ECS	SNH	SN055	Bedday State Home 055	BdDySN055		not used
ECS	SNH	SN056	Bedday State Home 056	BdDySN056		not used
ECS	SNH	SN057	Bedday State Home 057	BdDySN057		not used
ECS	SNH	SN058	Bedday State Home 058	BdDySN058		not used
ECS	SNH	SN059	Bedday State Home 059	BdDySN059		not used
ECS	SNH	SN060	Bedday State Home 060	BdDySN060		not used
ECS	SNH	SN061	Bedday State Home 061	BdDySN061		not used
ECS	SNH	SN062	Bedday State Home 062	BdDySN062		not used
ECS	SNH	SN063	Bedday State Home 063	BdDySN063		not used
ECS	SNH	SN064	Bedday State Home 064	BdDySN064		not used
ECS	SNH	SN065	Bedday State Home 065	BdDySN065		not used
ECS	SNH	SN066	Bedday State Home 066	BdDySN066		not used
ECS	SNH	SN067	Bedday State Home 067	BdDySN067		not used
ECS	SNH	SN068	Bedday State Home 068	BdDySN068		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	SNH	SN069	Bedday State Home 069	BdDySN069		not used
ECS	SNH	SN070	Bedday State Home 070	BdDySN070		not used
ECS	SNH	SN071	Bedday State Home 071	BdDySN071		not used
ECS	SNH	SN072	Bedday State Home 072	BdDySN072		not used
ECS	SNH	SN073	Bedday State Home 073	BdDySN073		not used
ECS	SNH	SN074	Bedday State Home 074	BdDySN074		not used
ECS	SNH	SN075	Bedday State Home 075	BdDySN075		not used
ECS	SNH	SN076	Bedday State Home 076	BdDySN076		not used
ECS	SNH	SN077	Bedday State Home 077	BdDySN077		not used
ECS	SNH	SN078	Bedday State Home 078	BdDySN078		not used
ECS	SNH	SN079	Bedday State Home 079	BdDySN079		not used
ECS	SNH	SN080	Bedday State Home 080	BdDySN080		not used
ECS	SNH	SN081	Bedday State Home 081	BdDySN081		not used
ECS	SNH	SN082	Bedday State Home 082	BdDySN082		not used
ECS	SNH	SN083	Bedday State Home 083	BdDySN083		not used
ECS	SNH	SN084	Bedday State Home 084	BdDySN084		not used
ECS	SNH	SN085	Bedday State Home 085	BdDySN085		not used
ECS	SNH	SN086	Bedday State Home 086	BdDySN086		not used
ECS	SNH	SN087	Bedday State Home 087	BdDySN087		not used
ECS	SNH	SN088	Bedday State Home 088	BdDySN088		not used
ECS	SNH	SN089	Bedday State Home 089	BdDySN089		not used
ECS	SNH	SN090	Bedday State Home 090	BdDySN090		not used
ECS	SNH	SN091	Bedday State Home 091	BdDySN091		not used
ECS	SNH	SN092	Bedday State Home 092	BdDySN092		not used
ECS	SNH	SN093	Bedday State Home 093	BdDySN093		not used
ECS	SNH	SN094	Bedday State Home 094	BdDySN094		not used
ECS	SNH	SN095	Bedday State Home 095	BdDySN095		not used
ECS	SNH	SN096	Bedday State Home 096	BdDySN096		not used
ECS	SNH	SN097	Bedday State Home 097	BdDySN097		not used
ECS	SNH	SN098	Bedday State Home 098	BdDySN098		not used
ECS	SNH	SN099	Bedday State Home 099	BdDySN099		not used
ECS	SNH	SN100	Bedday State Home 100	BdDySN100		not used
ECS	SNH	SN101	SN 0-25 Care Level Addon	AD 0-25		not used
ECS	SNH	SN102	SN 26-50 Care Level Addon	AD 26-50		not used
ECS	SNH	SN103	SN 51-75 Care Level Addon	AD 51-75		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	SNH	SN104	SN 76-100 Care Level Addon	AD 76-100		not used
ECS	SNH	SN105	SN 101-199 Care Level Addon	AD 101-199		not used
ECS	SNH	SN106	SN 200-299 Care Level Addon	AD 200-299		not used
ECS	SNH	SN107	SN 300-499 Care Level Addon	AD 300-499		not used
ECS	SNH	SN108	SN 500-599 Care Level Addon	AD 500-599		not used
ECS	SNH	SN109	SN >600 Care Level Addon	AD >600		not used
ECS	SNH	SN110	SN RUGS II	RUGS II		not used
ECS	SNH	SN111	SN RUGS III	RUGS III		not used

(3) LIST C – STATE DOMICILLIARY HOME DAYS ECS PRODUCTS

FDR SYS = ECS

Stop Code = 652

FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	SDH	SD001	Bedday State Dom 001	BdDySD001		not used
ECS	SDH	SD002	Bedday State Dom 002	BdDySD002		not used
ECS	SDH	SD003	Bedday State Dom 003	BdDySD003		not used
ECS	SDH	SD004	Bedday State Dom 004	BdDySD004		not used
ECS	SDH	SD005	Bedday State Dom 005	BdDySD005		not used
ECS	SDH	SD006	Bedday State Dom 006	BdDySD006		not used
ECS	SDH	SD007	Bedday State Dom 007	BdDySD007		not used
ECS	SDH	SD008	Bedday State Dom 008	BdDySD008		not used
ECS	SDH	SD009	Bedday State Dom 009	BdDySD009		not used
ECS	SDH	SD010	Bedday State Dom 010	BdDySD010		not used
ECS	SDH	SD011	Bedday State Dom 011	BdDySD011		not used
ECS	SDH	SD012	Bedday State Dom 012	BdDySD012		not used
ECS	SDH	SD013	Bedday State Dom 013	BdDySD013		not used
ECS	SDH	SD014	Bedday State Dom 014	BdDySD014		not used
ECS	SDH	SD015	Bedday State Dom 015	BdDySD015		not used
ECS	SDH	SD016	Bedday State Dom 016	BdDySD016		not used
ECS	SDH	SD017	Bedday State Dom 017	BdDySD017		not used
ECS	SDH	SD018	Bedday State Dom 018	BdDySD018		not used
ECS	SDH	SD019	Bedday State Dom 019	BdDySD019		not used
ECS	SDH	SD020	Bedday State Dom 020	BdDySD020		not used
ECS	SDH	SD021	Bedday State Dom 021	BdDySD021		not used

FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	SDH	SD022	Bedday State Dom 022	BdDySD022		not used
ECS	SDH	SD023	Bedday State Dom 023	BdDySD023		not used
ECS	SDH	SD024	Bedday State Dom 024	BdDySD024		not used
ECS	SDH	SD025	Bedday State Dom 025	BdDySD025		not used
ECS	SDH	SD026	Bedday State Dom 026	BdDySD026		not used
ECS	SDH	SD027	Bedday State Dom 027	BdDySD027		not used
ECS	SDH	SD028	Bedday State Dom 028	BdDySD028		not used
ECS	SDH	SD029	Bedday State Dom 029	BdDySD029		not used
ECS	SDH	SD030	Bedday State Dom 030	BdDySD030		not used
ECS	SDH	SD031	Bedday State Dom 031	BdDySD031		not used
ECS	SDH	SD032	Bedday State Dom 032	BdDySD032		not used
ECS	SDH	SD033	Bedday State Dom 033	BdDySD033		not used
ECS	SDH	SD034	Bedday State Dom 034	BdDySD034		not used
ECS	SDH	SD035	Bedday State Dom 035	BdDySD035		not used
ECS	SDH	SD036	Bedday State Dom 036	BdDySD036		not used
ECS	SDH	SD037	Bedday State Dom 037	BdDySD037		not used
ECS	SDH	SD038	Bedday State Dom 038	BdDySD038		not used
ECS	SDH	SD039	Bedday State Dom 039	BdDySD039		not used
ECS	SDH	SD040	Bedday State Dom 040	BdDySD040		not used
ECS	SDH	SD041	Bedday State Dom 041	BdDySD041		not used
ECS	SDH	SD042	Bedday State Dom 042	BdDySD042		not used

(4) LIST D – STATE HOSPITAL CARE ECS PRODUCTS

FDR SYS = ECS*Stop Code* = 653

FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	SHC	SH001	Bedday State Hospital 001	BdDySHC001		not used
ECS	SHC	SH002	Bedday State Hospital 002	BdDySHC002		not used
ECS	SHC	SH003	Bedday State Hospital 003	BdDySHC003		not used
ECS	SHC	SH004	Bedday State Hospital 004	BdDySHC004		not used
ECS	SHC	SH005	Bedday State Hospital 005	BdDySHC005		not used
ECS	SHC	SH006	Bedday State Hospital 006	BdDySHC006		not used
ECS	SHC	SH007	Bedday State Hospital 007	BdDySHC007		not used

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FDR SYS	TEMP DEPT	ECS Code	Product Description	Short Description	IP #	CPT #
ECS	SHC	SH008	Bedday State Hospital 008	BdDySHC008		not used
ECS	SHC	SH009	Bedday State Hospital 009	BdDySHC009		not used
ECS	SHC	SH010	Bedday State Hospital 010	BdDySHC010		not used
ECS	SHC	SH011	Bedday State Hospital 011	BdDySHC011		not used
ECS	SHC	SH012	Bedday State Hospital 012	BdDySHC012		not used
ECS	SHC	SH013	Bedday State Hospital 013	BdDySHC013		not used
ECS	SHC	SH014	Bedday State Hospital 014	BdDySHC014		not used
ECS	SHC	SH015	Bedday State Hospital 015	BdDySHC015		not used
ECS	SHC	SH016	Bedday State Hospital 016	BdDySHC016		not used
ECS	SHC	SH017	Bedday State Hospital 017	BdDySHC017		not used
ECS	SHC	SH018	Bedday State Hospital 018	BdDySHC018		not used
ECS	SHC	SH019	Bedday State Hospital 019	BdDySHC019		not used
ECS	SHC	SH020	Bedday State Hospital 020	BdDySHC020		not used