

March 13, 2000

ELIGIBILITY AND ENROLLMENT DATA PROCESSING

1. PURPOSE: This Veterans Health Administration (VHA) Directive provides medical facilities with instructions and guidelines for interpreting enrollment categories and statuses assigned to veterans, and for manually processing certain eligibility changes and enrollment information sent to facilities by the Health Eligibility Center (HEC).

2. BACKGROUND

a. Patch DG*5.3*147 was released to the field in November 1998. This patch introduced changes to the Registration 5.3 package to enable medical facilities to query the HEC for verified enrollment and eligibility data. These queries are generated automatically when registering a patient from either the "Register A Patient" or "Load/Edit Patient Data" options. Medical facility staff may also choose to send a query for enrollment and eligibility data by using the stand-alone Patient Enrollment option, "Send Query" action.

b. Patch DG*5.3*147 enables sites to receive and process unsolicited updates of enrollment and eligibility data to the medical facilities. An example of the HEC's use of this ability is when a veteran's compensation and pension (C&P) or Beneficiary Information Records Locator System (BIRLS) data is adjusted by the Veterans Benefits Administration (VBA). This change will trigger a transmission of updated eligibility data to the HEC, which amends the enrollment and eligibility records. The enrollment and eligibility data change at the HEC triggers an unsolicited transmission of the updated enrollment and eligibility data to all medical facilities that the patient has visited since January 1, 1996.

c. At the time of a patient's initial application for medical care, the medical facility staff is responsible for determining whether or not the applicant is eligible for Department of Veterans Affairs (VA) health care benefits (i.e., character of discharge and applicable length of service requirements). The medical facility staff is also responsible for documenting military service, C&P data and other eligibility data in the Patient Information Management System (PIMS) package in Veterans Health Information Integrated Systems Technology Architecture (VISTA).

d. Once the medical facility's database is populated, or seeded, with initial enrollment and eligibility data from the HEC, the HEC is responsible for making C&P award data changes to veteran's verified eligibility records.

e. These patches established a new MailMan (VISTA) mail group, DGEN ELIGIBILITY ALERT. The mail group receives Eligibility Alert Messages that notify a medical facility of certain major eligibility data changes sent by the HEC. Medical facility staff responsible for maintaining patient eligibility data should be included as members of the mail group and should review the Eligibility Alert Messages to determine if the data provided by the HEC is accurate. If the data provided by the HEC is believed to be erroneous, the medical facility staff are required to submit supporting documentation to the HEC for review and correction of the verified eligibility record. Information concerning processing Eligibility Alert Messages is described in Attachment A, Instructions for Processing Eligibility Alert Messages.

THIS DIRECTIVE EXPIRES MARCH 31, 2005

VHA DIRECTIVE 2000-010

March 13, 2000

f. Patch DG*5.3*232 was released to the field in August 1999. This patch enhances the **VISTA** users' ease in determining a veteran's enrollment status by adding several new enrollment statuses and an Enrollment Category that indicates whether a veteran is Enrolled, Not Enrolled, or has an Enrollment application "In Process" pending verification at the HEC. When the HEC is unable to verify a veteran's eligibility or determine the enrollment priority group, the HEC will assign the record the appropriate Pending Enrollment status and the record will remain in the "In Process" category until the necessary information is updated.

g. Attachment B, Enrollment Status Definitions and Processing Information, provides a description of the Enrollment categories and statuses, as well as the actions medical facility staff are responsible for taking to resolve eligibility discrepancies for "In Process" records. Several **VISTA** reports, including: Pending Applications for Enrollment, and enrollment-related outputs in the Ambulatory Care Reports Project (ACRP) Reports Menu, may be used to assist medical facility staff in identifying applications that are "In Process" and require additional information before these veterans may be enrolled.

h. Patch IVMB*2*402 (HEC patch) enables the HEC to transmit and download records with a Pending Enrollment status to databases at medical facilities treating the patient since January 1, 1996.

3. POLICY: It is VHA policy that the VA manage access to its health care system by enrolling veterans according to priority groups (see Attachment C, Enrollment Priority Groups) as established by law. *NOTE: Priority group assignments are based on verified eligibility data.*

4. ACTION

a. Each VA health care facility visited by a veteran has primary responsibility to assure the eligibility of a veteran. In addition, facility staff are required to follow the instructions in this Directive relating to processing Alert Messages and taking action on unprioritized records as described in Attachment A.

b. The HEC is responsible for performing a second level review of all eligibility determinations made by VA health care facilities for veterans enrolling in the VA national enrollment system. In addition, HEC staff are required to follow the instructions in this Directive relating to processing Alert Messages and taking action on unprioritized records as described in Attachment A. *NOTE: Once eligibility is verified by the HEC, the eligibility information on file at the HEC will become VHA's authoritative source for health care eligibility and enrollment classification. VA health care facilities can obtain the verified eligibility information through automated query processes. VA health care facilities may request an update or revision to HEC's validated eligibility information by submitting the appropriate documentation to the HEC.*

5. REFERENCES: None.

6. FOLLOW-UP RESPONSIBILITY: The Chief Information Officer (19) is responsible for the contents of this Directive. Questions concerning the content of this Directive should be referred to the HEC at 404-235-1300.

7. RECISSIONS: This VHA Directive will expire March 31, 2005.

S/ by Melinda Murphy for
Thomas L. Garthwaite, M.D.
Deputy Under Secretary for Health

Attachments

DISTRIBUTION: CO: E-mailed 3/14/2000
FLD: VISN, MA, DO, OC, OCRO, and 200 FAX 3/14/2000
EX: Boxes 104, 88, 63, 60, 54, 52, 47 and 44 – FAX 3/14/2000

ATTACHMENT A

INSTRUCTIONS FOR PROCESSING ELIGIBILITY ALERT MESSAGES

1. Eligibility Alert Messages generated by the local Veterans Health Information Systems Technology Architecture (**VISTA**) system when receiving enrollment and eligibility data from the Health Eligibility Center (HEC) will be sent to the DGEN ELIGIBILITY ALERT mail group. These alerts indicate certain major eligibility data changes or conditions that require attention. Data changes that generate an alert are an Eligibility Status change from service-connected to non-service-connected or a change in Prisoner of War (POW) status. The changes to a patient's record for a service-connected status or POW status are automatically made when the data is received from the HEC. The DGEN ELIGIBILITY ALERT mail group will also be utilized when the HEC has information to communicate to the medical facility regarding a patient's eligibility. A sample Eligibility Alert Message follows:

Subj: Eligibility Upload Alert: DOE,JOHN[#248997] 21 Jul 98 13:59 10 Lines
From: Registration Enrollment Module in 'IN' basket. Page 1 ****NEW****

The enrollment and eligibility upload produced the following alerts:

Patient Name: DOE, JOHN
SSN: 123456789
DOB: 06/01/49
SEX: MALE

****Alerts****

VETERAN CHANGE TO NONSERVICE-CONNECTED

Select MESSAGE Action: IGNORE (in IN basket)//

2. Medical facility staff should review the Eligibility Alert Messages to identify potentially erroneous changes in the veteran's **VISTA** eligibility data. If a discrepancy is identified, the staff may initiate data entry changes in **VISTA**. However, to prevent this data from being overwritten when an enrollment and/or eligibility update is received from the HEC, the data changes to correct the discrepancy must also be manually entered into the HEC database. Three alternative methods are available for medical facility staff to provide the HEC with the corrected data. They are:

a. **VISTA e-mail to G.Eligibility Alert mailgroup.** The medical facility staff may reply to the original Eligibility Alert Message via MailMan (**VISTA**) and include the corrected data in the body of the message. The medical facility staff may also initiate a new local MailMan (**VISTA**) message and send it to the G.ELIGIBILITY ALERT@IVM mail group. If the data is derived from a Hospital Inquiry (HINQ), the medical facility staff should copy and paste the HINQ into the message.

VHA DIRECTIVE 2000-010

March 13, 2000

b. **MS Exchange message to HEC Alert mailgroup.** Medical facility staff may initiate a Microsoft Exchange™ e-mail message including the corrected data into the body of the message, and send it to the HEC Alert group. If the data is derived from a HINQ, the medical facility staff should copy and paste the HINQ into the message.

c. **Fax documentation to the HEC.** If the corrected eligibility data is not available by HINQ, the medical facility staff should fax the documentation supporting their determination of the veteran's eligibility for Department of Veterans Affairs (VA) health care benefits to the HEC at 404-235-1355. Veteran identification information such as name, date of birth, social security number and/or claim number must be clearly legible on documents faxed to the HEC.

3. The HEC will consider the following documents acceptable for eligibility verification:

a. Department of Defense (DD) Form 214, Certificate of Release or Discharge from Active Duty or equivalent

b. VA Form 10-7131, Exchange of Beneficiary Information and Request for Administrative and Adjudicative Action

c. HINQ – Hospital Inquiry

d. VA Form 119, Report of Contact, this is to document discussion with VBA Records Management Center or Regional Office personnel

e. Veterans Administration Regional Office Award Letter

3. It is recommended that each medical facility retain a copy of a patient's DD214 and other related eligibility documentation in the administrative folder of the veteran's Consolidated Health Record. This includes sites that maintain electronic records.

ATTACHMENT B

ENROLLMENT STATUS DEFINITIONS AND PROCESSING INFORMATION

This Attachment describes each enrollment status and indicates any necessary follow-up actions that may be required.

Enrollment Category	Enrollment Status	Description	Action Required
Enrolled	Verified	The Health Eligibility Center (HEC) assigns this status to enrollment records that are within the groups that the Secretary of Veterans Affairs (henceforth referred to as the Secretary) has determined may be enrolled.	None
Not Enrolled	Rejected – Fiscal Year	The HEC assigns this status to enrollment records that are within the groups the Secretary has determined may not be enrolled during a particular fiscal year.	None
Not Enrolled	Rejected – Mid Cycle	The HEC assigns this status to enrollment records that are within the groups the Secretary has determined may not be enrolled for the remainder of an existing fiscal year.	None
Not Enrolled	Rejected – Stop Enrolling New Patients	The HEC assigns this status to new enrollment applications when the Secretary determines that new enrollment applications within that group may not be enrolled.	None
Not Enrolled	Rejected – Initial Application at Department of Veterans Affairs (VA) Medical Center	This status is assigned by the local system when a preliminary enrollment priority is calculated to be within the groups that the Secretary has determined may not be enrolled.	None
Not Enrolled	Canceled or Declined	This status may be assigned by the HEC when a veteran requests enrollment to be canceled or declines to be enrolled and the appropriate documentation has been transmitted to the HEC.	None

VHA DIRECTIVE 2000-010
March 13, 2000

Enrollment Category	Enrollment Status	Description	Action Required
Not Enrolled	Deceased	The local system assigns this status when a date of death is entered into Veterans Information Systems Technology Architecture (<i>VISTA</i>). The HEC assigns this status when a date of death is received from a VA medical facility or Beneficiary Information Records Locator System (BIRLS).	None
Not Enrolled	Ineligible	This status is assigned by the HEC when an “Ineligible Date” is entered in the veteran’s record by the HEC or a VA medical facility.	None
In Process	Unverified	This status is assigned by the local facility when a preliminary priority is calculated and the veteran is within the groups the Secretary has determined may be enrolled or when the system is unable to calculate a preliminary priority.	If the eligibility status is Unverified or Pending in <i>VISTA</i> , medical facility staff must attempt to re-verify the veteran’s eligibility and update <i>VISTA</i> . If the veteran’s eligibility cannot be confirmed, the VA medical center staff will update the <i>VISTA</i> record to reflect “Nonveteran” Patient Type with a “Humanitarian Emergency” Primary Eligibility Code.

In Process	Pending – Means Test Required	This status is assigned by the HEC when an enrollment application is missing required means test data or when a currently enrolled veteran’s means test is 366 days old.	The HEC will resolve and update records for veterans who HEC believes are subject to means testing, but who have been prioritized in groups 1-4 previously. Medical facility staff must complete a means test for non-service-connected (NSC) and noncompensable 0 percent service-connected (SC) veterans receiving VA health care benefits.
In Process	Pending – No Eligibility Code in VIVA (Veterans Information Verification Access) file	This status is assigned by the HEC when the patient’s <i>VISTA</i> records does not contain verified eligibility data and HEC’s query for Compensation & Pension (C&P) and BIRLS files returns “No Data on File.”	Medical facility staff must verify the veteran’s eligibility and provide source documentation to HEC. HEC staff will update the database and the corrected eligibility and enrollment data will be shared with VA facilities involved in the veteran’s care.

VHA DIRECTIVE 2000-010
March 13, 2000

Enrollment Category	Enrollment Status	Description	Action Required
In Process	Pending – Eligibility Unverified	This status is assigned by the HEC when the patient’s <i>VISTA</i> records does not contain verified eligibility data and HEC’s query for C&P and BIRLS files data returns unverified data.	If the eligibility status is Unverified or Pending in <i>VISTA</i> , medical facility staff must verify the veteran’s eligibility and provide the source documentation to HEC. HEC staff will update the database and the corrected eligibility and enrollment data will be shared with VA facilities involved in the veteran’s care.
In Process	Pending - Other	This status is assigned by the HEC when the HEC system does not have all the data necessary to verify an enrollment record and the criteria for the above Pending reasons has not been met.	HEC staff will review the case and resolve the issues causing the inability to complete the enrollment verification process.

ATTACHMENT C

ENROLLMENT PRIORITY GROUPS

- PRIORITY GROUP 1** Veterans with service-connected conditions rated 50 percent or more disabling.
- PRIORITY GROUP 2** Veterans with service-connected disabilities rated 30 percent or 40 percent disabling.
- PRIORITY GROUP 3** Veterans who are former Prisoners of War (POWs);
Veterans who were awarded a Purple Heart;
Veterans whose discharge was for a disability that was incurred or aggravated in the line of duty;
Veterans with service-connected conditions rated 10 percent or 20 percent disabling;
Veterans awarded special eligibility classification under Title 38 United States Code Section 1151, "Benefits for Individuals Disabled by Treatment of Vocational Rehabilitation."
- PRIORITY GROUP 4** Veterans who are receiving aid and attendance or housebound benefits;
Veterans who have been determined by the Department of Veterans Affairs (VA) to be catastrophically disabled.
- PRIORITY GROUP 5** Non service-connected veterans and service-connected veterans rated 0 percent disabled, whose annual income and net worth are below the established dollar threshold.
- PRIORITY GROUP 6** All other eligible veterans who are not required to make co-payments for their care, including:
World War I and Mexican Border War veterans;
Veterans receiving care solely for disabilities resulting from exposure to toxic substances, radiation, or for disorders associated with service in Persian Gulf War; or for any illness associated with service in combat in a war after the Gulf War or during a period of hostility after November 11, 1998;
Compensable 0 percent service-connected veterans.
- PRIORITY GROUP 7** Non-service-connected veterans and non-compensable 0 percent service-connected veterans whose needed care cannot be provided by enrolling in any of the groups above and who agree to pay the specified co-payment.