INCOME VERIFICATION MATCH (IVM)

TECHNICAL MANUAL

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V*ST***A** System Design and Development

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Date	Revision	Description	Author
10/9/01	1.0	Added OBX segment to ORU~Z07 HL7 Message Definition in Appendix A	Karen Stella
10/9/01	1.0	Updated OBX segment in ORF~Z11 and ORU~Z11 HL7 Message Definitions in Appendix A	Karen Stella
10/9/01	1.0	Updated OBX Segment Table in Appendix B to include NTR data descriptions	Karen Stella
10/9/01	1.0	Added VA0052 and VA0053 to Supported/User-Defined tables section in Appendix B	Karen Stella
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Introduction

Background

Public Law 101-508 permits the Department of Veterans Affairs (VA) to verify income data with the Internal Revenue Service (IRS) and Social Security Administration (SSA) for veterans receiving VA health care services whose eligibility for medical care is based on income. The income verification match process for Veterans Health Administration (VHA) medical facilities is centralized and performed at the Health Eligibility Center (HEC) in Atlanta, Georgia.

Functionality

IVM provides all of the functionality required to complete the eligibility verification process; electronically receive the revised VA Form 10-10F from the HEC; and automatically file the updated test in the **V***IST***A** Means Test module.

User Interactive Functions	Noninteractive Functions
• View/verify patient demographic, insurance, and SSN information received from SSA and IRS • Upload verified data • View billing/collection and Means Test activity • Configure, monitor, and purge the IVM system	• Exchange of data, on an ad hoc basis, between your facility and the HEC via electronic transmissions • Scheduled transmission to the HEC of all Means Tests meeting IVM criteria, as well as IVM-related billing and collections activity, via the *IVM Background Job* option *Note: Certain enrollment events, when they occur, are also sent to the HEC via the nightly background job.*

Related Manuals

IVM V. 2.0 User Manual
IVM V. 2.0 Installation Guide
IVM V. 2.0 Release Notes

Integration

IVM V. 2.0 provides functionality that impacts Registration, Medical Care Cost Recovery (MCCR), and Information Resource Management (IRM) staff at your facility. It is highly integrated with the following packages:

Package Name	Integration
Patient Information Management System (PIMS)	• PIMS demographic, Means Test, enrollment, eligibility, and income information is sent to the HEC • Means Test and demographic information verified by the HEC is uploaded into PIMS files
Integrated Billing (IB)	• Patient insurance information is transmitted to the HEC • Means Test charges are created in IB for patients who become Category C when a verified Means Test from IVM is transmitted to the facility • Insurance information identified by IVM is uploaded into IB files • IB provides billing and collections information, for billings resulting from IVM activity, that is transmitted back to the HEC
Health Level 7 (HL7)	Provides the foundation for all communications between your facility and the HEC

Implementation and Maintenance

There are three parameters included with the IVM software. These parameters, which can be edited through the IVM Parameter Enter/Edit option, control whether notification messages are sent to the IVM MESSAGES mail group when SSN, demographic, and insurance information is received from the HEC. If no entry is made, the default action is to generate the messages. This option may be used to inactivate the messages.

The background option *IVM Background Job* must be queued to run daily. It is recommended that it is run during nonpeak hours. The option will transmit the following information to the HEC: Means Test, patient demographic, eligibility, income test, insurance, enrollment, and IVM-related billing and collections.

The mail group *IVM Transmissions* is used to route transmissions to the HEC. You should assure that the single remote user S.HL SERVER@IVM.VA.GOV is the only member of this group.

All IVM notifications generated by the system are sent to the *IVM Messages* mail group. At a minimum, both the IRM Support Specialist and the IVM systems coordinator should be added as members of this group.

No data in the IVM files should be edited. This data is added and maintained automatically by the module.

Routines

Per VHA Directive 10-93-142 regarding security of software that affects financial systems, most of the IVM routines may not be modified. The third line of routines that may not be modified is so noted. The IVM output routines in the IVMR* namespace are exempt from this requirement.

Callable Routines

The IVM package has no supported callable routines.

Routines to Map

It is recommended that the following routines be mapped.

IVML*
IVMR*
IVMU*

Routine List

Take the following steps to obtain a list of routines in the IVM V. 2.0 software:

1. Programmer Options Menu
2. Routine Tools Menu
3. First Line Routine Print Option
4. Routine Selector: IVM*

Files

Globals to Journal

The IVM global is the only global used with the IVM software and it should be journaled.

File List

Per VHA Directive 10-93-142 regarding security of software that affects financial systems, the IVM Data Dictionaries may not be modified. The file descriptions of these files are so noted.

File Number	File Name	Global
301.5	IVM PATIENT	^IVM(301.5
301.6	IVM TRANSMISSION LOG	^IVM(301.6
301.61	IVM BILLING TRANSMISSION	^IVM(301.61
301.63	IVM EXTRACT MANAGEMENT	^IVM(301.63
301.9	IVM SITE PARAMETER	^IVM(301.9
301.91*	IVM REASONS FOR NOT UPLOADING INSURANCE	^IVM(301.91
301.92*	IVM DEMOGRAPHIC UPLOAD FIELDS	^IVM(301.92
301.93*	IVM CASE CLOSURE REASON	^IVM(301.93

*File comes with data

Take the following steps to obtain information about the files and templates in the IVM software:

File Flow (Relationships between files)

1. VA FileMan Menu
2. Data Dictionary Utilities Menu
3. List File Attributes Option
4. Enter File # or range of File #s
5. Select Listing Format: Standard
6. You will see what files point to the selected file. To see what files the selected file points to, look for fields that say “POINTER TO”.

Templates

1. VA FileMan Menu
2. Print File Entries Option
3. Output from what File: Print Template
   Sort Template
   Input Template
   List Template
4. Sort by: Name
5. Start with name: IVM
6. Within name, sort by: <RET>
7. First print field: Name

Exported Options

Take the following are the steps to obtain information about menus, exported protocols, exported options, and exported remote procedures relating to the IVM package.

Menu Diagram

1. Programmers Options
2. Menu Management Menu
3. Display Menus and Options Menu
4. Diagram Menus
5. Select User or Option Name: O.IVM MAIN MENU

Exported Protocols

1. VA FileMan Menu
2. Print File Entries Option
3. Output from what File: PROTOCOL
4. Sort by: Name
5. Start with name: IVM
6. Within name, sort by: <RET>
7. First print field: Name

Exported Options

1. VA FileMan Menu
2. Print File Entries Option
3. Output from what File: OPTION
4. Sort by: Name
5. Start with name: IVM
6. Within name, sort by: <RET>
7. First print field: Name

Exported Remote Procedures

1. VA FileMan Menu
2. Print File Entries Option
3. Output from what File: REMOTE PROCEDURE
4. Sort by: Name
5. Start with name: IVM
6. Within name, sort by: <RET>
7. First print field: Name

Archiving and Purging

Archiving

There are no archiving capabilities included with the IVM software.

Purging

The Purge IVM Transmissions option allows IRM to purge entries from the IVM TRANSMISSION LOG file (#301.6) which are associated with closed cases (entries in the IVM PATIENT file (#301.5)) from the previous Means Test year).

Package-wide Variables

There are no package-wide variables associated with the IVM software package.

SACC Exemptions/Non-Standard Code

There are no SACC Exemptions associated with the IVM software package.

External/Internal Relations

External Relations

The following **V***IST***A** package versions (or higher) MUST be installed PRIOR to loading this version of IVM.

Kernel	V. 7.1
VA FileMan	V. 20.0
PIMS	V. 5.3
Integrated Billing	V. 2.0
OERR	V. 2.5
HL7	V. 1.5

DBIA Agreements

Take the following steps to obtain database integration agreements for the IVM package.

Custodial Package	Subscriber Package
1. FORUM 2. DBA MENU 3. Integration Agreement Menu Custodial Package Menu 4. Active by Custodial Package Option 5. Select Package Name: IVM	1. Forum 2. DBA MENU 3. Integration Agreement Menu 4. Subscriber Package Menu 5. Print Active by Subscriber Package Option 6. Start with subscriber package: IVM

Internal Relations

All of the IVM V. 2.0 package options have been designed to stand alone.

Security

General Security

Public Law 101-508 permits the Department of Veterans Affairs (VA) to verify income data with the Internal Revenue Service (IRS) and Social Security Administration (SSA) for veterans receiving VA health care services whose eligibility for medical care is based on income. The IVM process for Veterans Health Administration (VHA) medical facilities is centralized and performed at the HEC in Atlanta, Georgia.

Per VHA Directive 10-93-142 regarding security of software that affects financial systems and central data bases, IVM routines may not be modified with the following exception: IVMR* - IVM Reports. In compliance with this same directive, the IVM Data Dictionaries may not be modified.

Security Keys

Take the following steps to obtain information about the security keys contained in the IVM software:

1. VA FileMan Menu
2. Print File Entries
3. Output From What File: Security Key
4. Sort By: Name
5. Start With Name: First// IVM
6. Go To Name: Last// IVMZ
7. Within Name, Sort By: <RET>
8. First Print Field: Name
9. Then Print Field: Description

VA FileMan Access Codes

The following is a list of recommended VA FileMan access codes for the files in the IVM software.

File Number	File Name	DD Access	RD Access	WR Access	DEL Access	LAYGO Access
301.5	IVM PATIENT	@		@	@	@
301.6	IVM TRANSMISSION LOG	@		@	@	@
301.61	IVM BILLING TRANSMISSION	@		@	@	@
301.63	IVM EXTRACT MANAGEMENT	@		@	@	@
301.9	IVM SITE PARAMETER	@		@	@	@
301.91	IVM REASONS FOR NOT UPLOADING INSURANCE	@		@	@	@
301.92	IVM DEMOGRAPHIC UPLOAD FIELDS	@		@	@	@
301.93	IVM CASE CLOSURE REASON	@		@	@	@

How to Generate On-line Documentation

This section describes some of the various methods by which users may secure IVM technical documentation. On-line technical documentation pertaining to the IVM software, in addition to that which is located in the help prompts, may be generated through utilization of several Kernel options, including those listed in this section. Refer to the **V***IST***A** Kernel Reference Manual for further information about other utilities which supply on-line technical documentation.

Xindex

This option analyzes the structure of a routine(s) to determine in part if the routine(s) adheres to **V***IST***A** Programming Standards. The XINDEX output may include the following components: compiled list of errors and warnings, routine listing, local variables, global variables, naked globals, label references, and external references. By running XINDEX for a specified set of routines, the user might discover any deviations from **V***IST***A** Programming Standards which exist in the selected routine(s) and see how routines interact with one another, that is, which routines call or are called by other routines.

To run XINDEX for the IVM package, specify the IVM namespace at the "routine(s) ?>" prompt. IVM initialization routines which reside in the UCI in which XINDEX is being run, as well as local routines found within the IVM namespace, should be omitted at the "routine(s)?>" prompt. To omit routines from selection, preface the namespace with a minus sign (-).

List File Attributes

This VA FileMan option allows the user to generate documentation pertaining to files and file structure. Using this option via the "Standard" format will yield the following data dictionary information for a specified file(s): file name and description, identifiers, cross-references, files pointed to by the file specified, files which point to the file specified, input templates, print templates, and sort templates. In addition, the following applicable data is supplied for each field in the file: field name, number, title, global location, description, help prompt, cross-reference(s), input transform, date last edited, and notes.

Using the "Global Map" format of this option generates an output which lists all cross-references for the file selected, global location of each field in the file, input templates, print templates, and sort templates, when applicable. For a comprehensive list of IVM files, please refer to the FILES section of this manual.

Glossary

This glossary contains terms and their definitions as they relate to the IVM package.

Category A veteran	A patient who, as a result of Means Testing, is in the mandatory category in regard to eligibility for VA care.
Category C veteran	A patient who, as a result of Means Testing, is in the discretionary category in regard to eligibility for VA care.
Full Data Transmission	A complete information profile transmitted to the HEC containing patient demographic, eligibility, Means Test, income, insurance, and enrollment information.
HEC	Health Eligibility Center (formerly IVM Center)
HL7	Health Level 7 is an interface specification designed to standardize the way in which health care information is transferred between systems. IVM utilizes the **V***IST***A** HL7 package to assist in transporting data using this specification.
IRS	Internal Revenue Service
IVM	Income Verification Match. A program designed to verify income and insurance data reported by the veteran with that received from IRS (Internal Revenue Service), SSA (Social Security Administration), and other sources.

Means Test	Eligibility for VA hospital care and nursing home care is divided into two categories - mandatory and discretionary. An income assessment is made to determine whether a non service-connected veteran, who is not in receipt of VA monetary benefits or otherwise exempt from income assessment, is eligible for cost-free VA medical care. This income assessment is known as "Means Testing". Patients whose income is above the defined income levels must agree to make copayments to VA for outpatient and inpatient care rendered.
SSA	Social Security Administration
Suggested SSN	Patient or spouse SSNs returned from SSA as possible matches based on name, sex, and date of birth. These SSNs will be validated by the HEC before being returned to the field facilities.
Third Party Claim	When a party other than the patient, such as an insurance company, is billed.

Appendix A - IVM Data Transmissions

Basic knowledge of the HL7 protocol is assumed and the information contained in the HL7 protocol will not be repeated *here.* Further information concerning the HL7 protocol may be found in the HL7 Interface Standards *V.* 2.1.

1. Purpose

This document specifies the purpose of the interface between the **V***IST***A** IVM package and the HEC (non-**V***IST***A**) system based on the HL7 protocol. It is intended that this interface form the basis for exchange of healthcare information between the **V***IST***A** IVM package and the HEC system.

2. Scope

This document describes the messages that are exchanged between the **V***IST***A** IVM package and the HEC (non-**V***IST***A**) system for the purpose of exchanging income test, demographic, insurance, and enrollment information.

3. General

This application uses the abstract message approach and encoding rules specified by HL7. HL7 is used for communicating data associated with various events that occur in healthcare environments. For example, when a Means Test is added in **V***IST***A**, the event will trigger a Full Data Transmission message to the HEC.

4. Communications Protocol

HL7 V. 1.5 of the VA MailMan lower level protocol (LLP) will be used to transmit HL7 messages between the local site and the HEC.

5. Background Messages

On a daily basis, the data associated with various events that occur in **V***IST***A** will be transmitted to the HEC. The IVM Background Job option will be used to transmit a HL7 unsolicited Full Data Transmission for each **V***IST***A** event occurring that day.

6. Batch Messages

All HL7 unsolicited messages sent from the **V***IST***A** IVM application and received from the HEC (non-**V***IST***A**) system will be in a batch format. Each batch will contain 1-100 messages/records per batch.

7. HL7 Message Event Types

IVM V. 2.0 supports the receipt and transmission of the following HL7 message event types (data transmissions).

HL7 Transmission Name	HL7 MESSAGE TYPE	HL7 Event Code
SSN Data Transmission	ORU	Z03
Insurance Data Transmission	ORU	Z04
Follow-up Data Transmission	ORU	Z04
Demographic Data Transmission	ORU	Z05
Means Test Data Transmission	ORU	Z06
Full Data Transmission	ORF/ORU	Z07
Case Status Data Transmission	ORU	Z08
Billing/Collection Data Transmission	ORU	Z09
Income Test Data Transmission	ORU/ORF	Z10
Enrollment/Eligibility Data Transmission	ORF/ORU	Z11
V*IST***A** – Initiated Enrollment/Eligibility Query Transmission	QRY	QRY
IVM – Initiated Query Transmission	QRY	QRY

NOTE: The transmission of the Initial Data Transmission (ORU~Z01) and the Full Data Transmission (ORU/ORF~Z02) type messages are no longer supported.

8. HL7 Message Segments

IVM V.2.0 utilizes the following HL7 segments to support the exchange of patient data.

Segment ID	Segment Name
FT1	Financial Segment
IN1	Insurance Segment
NTE	Notes And Comments Segment
OBX	Observation/Result Segment
PID	Patient Identification Segment
QRD	Query Definition Segment
QRF	Query Filter Segment
ZBT	VA-Specific Beneficiary Travel Segment
ZCD	VA-Specific Catastrophic Disability Segment
ZCT	VA-Specific Emergency Contact Segment
ZDP	VA-Specific Patient Dependent Information Segment
ZEL	VA-Specific Patient Eligibility Segment
ZEM	VA-Specific Employment Information Segment
ZEN	VA-Specific Enrollment Segment
ZFE	VA-Specific Fee Basis Segment
ZGD	VA-Specific Guardian Segment
ZIC	VA-Specific Income Segment
ZIE	VA-Specific Patient Ineligible Segment
ZIO	VA-Specific Inpatient/Outpatient Information Segment
ZIR	VA-Specific Income Relation Segment
ZIV	VA-Specific Message Processing Segment
ZMT	VA-Specific Means Test/Copay Test Information Segment
ZPD	VA-Specific Patient Information Segment
ZRD	VA-Specific Rated Disabilities Segment
ZSP	VA-Specific Service Period Segment
ZTA	VA-Specific Temporary Address Segment

9. HL7 Message Definitions

In this section, the following elements will be defined for each HL7 message.

- Message Type
- Message Event Code
- Abstract Message Syntax (list of segments used in the message)
- List of Data Fields (sequence numbers used for each segment)

An HL7 message is composed of individual HL7 segments. Each individual segment contains logical groupings of data. The Braces { } indicate one or more repetitions of the enclosed group of segments. The Brackets [ ] indicate that a segment may be optional. For each message, there will be a list of HL7 standard segments or VA-specific "Z" segments used in the message. The data fields (represented by sequence numbers) utilized in each segment will also be specified. The HL7 Transmission/Event Type Codes are annotated beside each message type.

Please note that an ORF transmission contains the MSA and QRD segments, but the ORU transmission does not.

SSN Data Transmission - (ORU~Z03)

The SSN data transmission transmits new veteran or spouse social security numbers to your facility from the HEC.

BHS Batch Header Segment
{MSH Message Header
PID Patient Identification Segment (***SEQ 1,3,5,7,19***)
ZIV VA-Specific Message Processing Segment (***SEQ 1-7,12***)
}
BTS Batch Trailer

Insurance Data Transmission - (ORU~Z04)

The insurance data transmission transmits patient insurance information to your facility from HEC.

BHS Batch Header
{MSH message header
PID Patient Information Segment (***SEQ 1,3,5,7,19***)
IN1 Insurance Segment (***SEQ 1,4-5,7-9,12-13,15-17,28,36***)
ZIV VA-Specific Message Processing Segment (***SEQ 1,9,12***)
}
BTS Batch Trailer

Follow-up insurance data transmissions are transmitted from your facility to alert the HEC as to the action taken regarding insurance information acceptance or rejection. The format for the responding transmission follows (message will NOT be batched).

MSH Message Header
PID Patient Identification Segment (***SEQ 1,3,5,7,19***)
IN1 Insurance Segment (***SEQ 1,4,36***)
ZIV VA-Specific Message Processing Segment (***SEQ 1,9-11***)

Demographic Data Transmission - (ORU~Z05)

BHS Batch Header
{MSH Message Header
PID Patient Identification Segment (***SEQ 1,3,5,7-8,11-13,19)***
ZPD VA-Specific Patient Info Segment ***(SEQ 1,9,13)***
ZGD VA-Specific Guardian Segment ***(SEQ 1-8)***
}
BTS Batch Trailer

Means Test Data Transmission - (ORU~Z06)

The means test data transmission transmits the IVM-verified means test from the HEC to your facility.

BHS Batch Header
{MSH Message Header
PID Patient Identification Segment (***SEQ 1,3,19***)
ZIC VA-Specific Income Segment (***SEQ 1-20***)
ZIR VA-Specific Income Relation Segment (***SEQ 1-5,10***)
{ZDP VA-Specific Dependent Info Segment (***SEQ 1-9 for spouse and SEQ 1-7,9 for all other dependents***)
ZIC VA-Specific Income Segment (***SEQ 1-12,16-20 for spouse and SEQ 1-12,15 for all other dependents***)
ZIR VA-Specific Income Relation Segment (***SEQ 1 for spouse and SEQ 1,3,6-9 for all other dependents***)
}
ZMT VA-Specific Means Test Info Segment (***SEQ 1-5,7-12,15,17-21***)
}
BTS Batch Trailer

Case Status Data Transmission - (ORU~Z08)

The case status data transmission is generated by the HEC to alert your facility of closed cases.

BHS Batch Trailer
{MSH Message Header
PID Patient Identification Segment (SEQ 1,3,5,7,19)
ZIV VA-Specific Message Processing Segment (SEQ 1,2,8)
}
BTS batch trailer

Billing/Collection Data Transmission - (ORU~Z09)

the billing/collection data transmission transmits IVM-related billing and collections information to the HEC.

BHS Batch Header
{MSH Message Header
PID Patient Identification Segment (SEQ 1,3,5,7,19)
FT1 Financial Transaction (SEQ 1,4,6-7,9,11)
}
ZIC VA-Specific Income Segment (SEQ 1-2)
}
BTS Batch Trailer

Full Data Transmission - (ORU~Z07)

The Full Data Transmission transmits a complete profile of patient demographic, eligibility, Means Test, income, insurance, and enrollment information to the HEC.

BHS Batch Header
{MSH Message Header
PID Patient Identification Segment ***(SEQ 1,3,5,7-8,11-14,19)***
ZPD VA-Specific Patient Info Segment ***(SEQ 1,8-9,11-13,17,19)***
ZTA VA-Specific Temporary Address Segment ***(SEQ 1-7)***
ZIE VA-Specific Patient Ineligible Segment ***(SEQ 1-3)***
{ZEL VA-Specific Patient Eligibility Segment ***(SEQ 1-2,5-8,10-11,13-21 for primary eligibility and SEQ 1-2 for all other eligibilities)***
}
ZEN VA-Specific Enrollment Segment ***(SEQ 1-13***)
ZCD VA-Specific Catastrophic Disability Segment ***(SEQ 1-5)***
{ZRD VA-Specific Rated Disabilities Segment ***(SEQ 1-4)***
}
ZCT VA-Specific Emergency Contact Segment ***(SEQ 1-7)***
{ZEM VA-Specific Employment Info Segment ***(SEQ 1-3)***
}
{ZGD VA-Specific Guardian Segment ***(SEQ 1-8)***
}
ZIC VA-Specific Income Segment ***(SEQ 1-21)***
ZIR VA-Specific Income Relation Segment ***(SEQ 1-5,10)***
{ZDP VA-Specific Dependent Information Segment ***(SEQ 1-9 for spouse*** *and* ***SEQ 1-7,9 for all other dependents)***
ZIC VA-Specific Income Segment ***(SEQ 1-12,16-20 for spouse*** and ***SEQ 1-12,15 for all other dependents)***
ZIR VA-Specific Income Relation Segment ***(SEQ 1 for spouse*** and ***SEQ 1,3,6-9 for all other dependents)***
}
ZIO VA-Specific Patient Info Segment ***(SEQ 1-4)***
{NTE Notes & Comments ***(SEQ 1,3)***
}
{IN1 Insurance Segment ***(SEQ 1,4-5,7-9,12-13,15-17,28,36)***
}
ZMT VA-Specific Means Test Information Segment ***(SEQ 1-18)***
ZMT VA-Specific CoPay Test Information Segment ***(SEQ 1-4,9,12,15-18)***
ZBT VA-Specific Beneficiary Travel Information Segment ***(SEQ 1-4,7)***

Full Data Transmission - (ORU~Z07), (continued)

[{ZFE VA-Specific Fee Basis Segment (***SEQ 1-5***)
}]
ZSP VA-Specific Service Period Segment ***(SEQ 1-8)***
}

{[OBX Observation/Result Segment ***(SEQ 2,3,5,11,14,15,17)***
]}

BTS Batch Trailer

Full Data Transmission - (ORF~Z07)

The Full Data Transmission transmits a complete profile of patient demographic, eligibility, Means Test, income, insurance, and enrollment information to the HEC.

MSH Message Header
MSA Message Acknowledgment
QRD Query Definition ***(segment as submitted in HEC initiated query)***
PID Patient Identification Segment ***(SEQ 1,3,5,7-8,11-14,19)***
ZPD VA-Specific Patient Info Segment ***(SEQ 1,8-9,11-13,17,19)***
ZTA VA-Specific Temporary Address Segment ***(SEQ 1-7)***
ZIE VA-Specific Patient Ineligible Segment ***(SEQ 1-3)***
{ZEL VA-Specific Patient Eligibility Segment ***(SEQ 1-2,5-8,10-11,13-21 for primary eligibility and SEQ 1-2 for all other eligibilities)***
}
ZEN VA-Specific Enrollment Segment ***(SEQ 1-13)***
ZCD VA-Specific Catastrophic Disability Segment ***(SEQ 1-5)***
{ZRD VA-Specific Rated Disabilities Segment ***(SEQ 1-4)***
}
ZCT VA-Specific Emergency Contact Segment ***(SEQ 1-7)***
{ZEM VA-Specific Employment Info Segment ***(SEQ 1-3)***
}
{ZGD VA-Specific Guardian Segment ***(SEQ 1-8)***
}
ZIC VA-Specific Income Segment ***(SEQ 1-21)***
ZIR VA-Specific Income Relation Segment ***(SEQ 1-5,10)***
{ZDP VA-Specific Dependent Information Segment ***(SEQ 1-9 for spouse and SEQ 1-7,9 for all other dependents)***
ZIC VA-Specific Income ***Segment (SEQ 1-12,16-20 for spouse and SEQ 1-12,15 for all other dependents)***
ZIR VA-Specific Income Relation Segment ***(SEQ 1 for spouse and SEQ 1,3,6-9 for all other dependents)***
}
ZIO VA-Specific Patient Info Segment ***(SEQ 1-4)***
{NTE Notes & Comments ***(SEQ 1,3)***
}
{IN1 Insurance Segment ***(SEQ 1,4-5,7-9,12-13,15-17,28,36)***
}
ZMT VA-Specific Means Test Information Segment ***(SEQ 1-18)***
ZMT VA-Specific CoPay Test Information Segment ***(SEQ 1-4,9,12,15-18)***
ZBT VA-Specific Beneficiary Travel Information Segment ***(SEQ 1-4,7)***
[{ZFE VA-Specific Fee Basis Segment **(SEQ 1-5)**

}]
ZSP VA-Specific Service Period Segment ***(SEQ 1-8)***

{[OBX Observation/Result Segment ***(SEQ 2,3,5,11,14,15,17)***
]}

BTS Batch Trailer

Income Test Data Transmission - (ORU~Z10)

The income test data transmission transmits income data for veteran, spouse, and dependents to the HEC.

BHS	Batch Header
{MSH	Message Header
PID	Patient Identification Segment ***(SEQ 1,3,7-8,19)***
ZIC	VA-Specific Income Segment ***(SEQ 1-20)***
ZIR	VA-Specific Income Relation Segment ***(SEQ 1-5,10)***
{ZDP	VA-Specific Dependent Information Segment ***(SEQ 1-6,8-9 for spouse and SEQ 1-6,9 for all other dependents)***
ZIC	VA-Specific Income Segment ***(SEQ 1-12,16-20 for spouse and SEQ 1-12,15 for all other dependents)***
ZIR	VA-Specific Income Relation ***Segment (SEQ 1 for spouse and SEQ 1,3,6-9 for all other dependents)***
}	
ZMT	VA-Specific Means Test ***(SEQ 1-19,22-26)***
ZMT	VA-Specific Co-Pay Test ***(SEQ 1-4,9-10,12,15-19,22,25-26)***
ZBT	VA-Specific Beneficiary Travel Information Segment ***(SEQ 1-2)***
}	
BTS	Batch Trailer

Income Test Data Transmission - (ORF~Z10)

The income test data transmission transmits income data for veteran, spouse, and dependents to the HEC.

MSH	Message Header
MSA	Message Acknowledgment
QRD	Query Definition (segment as submitted in **V*IST*A** Initiated Query)
QRF	Query Filter (segment as submitted in **V*IST*A** Initiated Query)
PID	Patient Identification Segment ***(SEQ 1,3,7-8,19)***
ZIC	VA-Specific Income Segment ***(SEQ 1-20)***
ZIR	VA-Specific Income Relation Segment ***(SEQ 1-5,10)***
{ZDP	VA-Specific Dependent Information Segment **(SEQ 1-6,8-9 for spouse and SEQ 1-6,9 for all other dependents)**
ZIC	VA-Specific Income Segment **(SEQ 1-12,16-20 for spouse and SEQ 1-12,15 for all other dependents)**
ZIR	VA-Specific Income Relation Segment ***(SEQ 1 for spouse and SEQ 1,3,6-9 for all other dependents)***
}	
ZMT	VA-Specific Means Test Information Segment ***(SEQ 1-19,22-26)***
ZMT	VA-Specific Co-Pay Test Information Segment ***(SEQ 1-4,9-10,12,15-19,22,25-26)***
ZBT	VA-Specific Beneficiary Travel Information Segment ***(SEQ 1-2)***

BTS	Batch Trailer

VISTA Initiated - Enrollment/Eligibility Query Data Transmission - (QRY)

MSH Message Header
QRD Query Definition ***(SEQ 1-4,7-10,12)***
SEQ 1 - Query Date/Time
SEQ 2 - Query Format Code ***("R": Record-Oriented)***
SEQ 3 - Query Priority ***("I": Immediate)***
SEQ 4 - Query ID ***(Internal VISTA-specific Patient DFN)***
SEQ 7 - Quantity Limited Request ***("1~RD": One/single record)***
SEQ 8 - Who Subject Filter ***(VISTA-specific Patient SSN)***
SEQ 9 - What Subject Filter ***("OTH": Other)***
SEQ 10 - What Department Data Code ***("ENROLLMENT")***
SEQ 11 – What data code value
(Date for which to return enrollment, if no date is specified assume the most recent enrollment data is being requested.)
SEQ 12 - Query Results Level ***("T": Full Results)***
QRF Query Filter ***(SEQ 1,4-5)***
SEQ 1 - Where Subject Filer ***("IVM")***
SEQ 4 - What User Qualifier ***(VISTA-specific Patient Date of Birth)***
SEQ 5 - Other Subject Query Filter ***(VISTA-specific Patient Sex; "M" or "F")***

Enrollment/Eligibility Data Transmission - (ORF~Z11)

The Enrollment/Eligibility Data Transmission transmits a veteran's eligibility and enrollment information form the HEC to the VAMCs.

MSH Message Header
MSA Message Acknowledgment
QRD Query Definition ***(segment as submitted in VISTA initiated query)***
QRF Query Filter ***(segment as submitted in VISTA initiated query)***
PID Patient Identification Segment ***(SEQ 1,3,5,7-8,19)***
ZPD VA-Specific Patient Info Segment ***(SEQ 1,8-9,12,17)***
ZIE VA-Specific Patient Ineligible Segment ***(SEQ 1-4)***
{ZEL VA-Specific Patient Eligibility Segment ***(SEQ 1-2,5-8,10-11,13-21)***
for primary eligibility and ***(SEQ 1-2)*** *for all other eligibilities.*
}
ZEN VA-Specific Enrollment Segment ***(SEQ 1-13)***
ZMT VA-Specific Means Test Information Segment ***(SEQ 1,3)***
In this message, the segment is meant only to convey the Means Test status on which the enrollment priority was based. The SET ID field should contain a value of "1" ("1" means that the segment refers to a means test and "2" means that the segment refers to a copay test) and SEQ 3 should contain the means test status.
ZCD VA-Specific Catastrophic Disability Segment ***(SEQ 1-5)***
ZSP VA-Specific Service Period Segment ***(SEQ 1-3,6-8)***
{ZRD VA-Specific Rated Disabilities Segment ***(SEQ 1-3)***
}
[OBX Observation/Result Segment ***(SEQ 2,3,5,11,16)***
]

Enrollment/Eligibility Data Transmission - (ORU~Z11)

The Enrollment/Eligibility Data Transmission transmits a veteran's eligibility and enrollment information form the HEC to the VAMCs.

BHS Batch Header
{MSH Message Header
PID Patient Identification Segment ***(SEQ 1,3,5,7-8,19)***
ZPD VA-Specific Patient Info Segment ***(SEQ 1,8-9,12,17)***
ZIE VA-Specific Patient Ineligible Segment ***(SEQ 1-4)***
{ZEL VA-Specific Patient Eligibility Segment ***(SEQ 1-2,5-8,10-11,13-21)*** for primary eligibility and ***(SEQ 1-2)*** *for all other eligibilities.*
}
ZEN VA-Specific Enrollment Segment ***(SEQ 1-13)***
ZMT VA-Specific Means Test Information Segment ***(SEQ 1,3)*** **In this message the segment is meant only to convey the means test status on which the enrollment priority was based. The SET ID field should contain a value of '1' ('1' means that the segment refers to a means test and '2' means that the segment refers to a copay test) and SEQ 3 should contain the means test status.**
ZCD VA-Specific Catastrophic Disability Segment ***(SEQ 1-5)***
ZSP VA-Specific Service Period Segment ***(SEQ 1-3,6-8)***
{ZRD VA-Specific Rated Disabilities Segment ***(SEQ 1-3)***
}
[OBX Observation/Result Segment ***(SEQ 2,3,5,11,16)***
]
}
BTS Batch Trailer

10. Trigger Events

Enrollment Trigger Events

The following enrollment events in **VISTA** will trigger an HL7 Full Data Transmission (ORU~Z07) message to be sent to the HEC for a patient.

Trigger Events Implemented via File Cross-References

File/Field #	Cross-Reference	New?	API Call
PATIENT (#2) FILE			
PRIMARY ELIGIBILITY (.361)	AENR361	NO	AUTOUPD^DGENA2
ELIGIBILITY (.01) in the PATIENT ELIGIBILITIES sub-file (2.0361)	AENR01	NO	AUTOUPD^DGENA2
DATE OF DEATH (.351)	AENR351	NO	AUTOUPD^DGENA2
SERVICE CONNECTED (.301)	AENR301	NO	AUTOUPD^DGENA2
SERVICE CONNECTED PERCENTAGE (.302)	AENR302	NO	AUTOUPD^DGENA2
POW STATUS INDICATED (.525)	AENR525	NO	AUTOUPD^DGENA2
RECEIVING A&A BENEFITS (.36205)	AENR36205	NO	AUTOUPD^DGENA2
RECEIVING HOUSEBOUND BENEFITS (.36215)	AENR36215	NO	AUTOUPD^DGENA2
RECEIVING A VA PENSION (.36235)	AENR36235	NO	AUTOUPD^DGENA2
TOTAL ANNUAL VA CHECK AMOUNT (.36295)	AENR36295	NO	AUTOUPD^DGENA2
DISABILITY RET. FROM MILITARY (.362)	AENR362	NO	AUTOUPD^DGENA2
MEDICAID (.381)	AENR381	NO	AUTOUPD^DGENA2
EXPOSED TO AGENT ORANGE (.32102)	AENR32102	NO	AUTOUPD^DGENA2
RADIATION EXPOSURE (.32103)	AENR32103	NO	AUTOUPD^DGENA2
ENVIRONMENTAL CONTAMINANTS (.322013)	AENR322013	NO	AUTOUPD^DGENA2
NAME (.01)	AENR01	YES	EVENT^IVMPLOG
SEX (.02)	AENR02	YES	EVENT^IVMPLOG
DATE OF BIRTH (.03)	AENR03	YES	EVENT^IVMPLOG
SOCIAL SECURITY NUMBER (.09)	AENR09	YES	EVENT^IVMPLOG
STREET ADDRESS [LINE 1] (.111)	AENR111	YES	EVENT^IVMPLOG
STEEET ADDRESS [LINE 2] (.112)	AENR112	YES	EVENT^IVMPLOG
STREET ADDRESS [LINE 3] (.113)	AENR113	YES	EVENT^IVMPLOG
CITY (.114)	AENR114	YES	EVENT^IVMPLOG
STATE (.115)	AENR115	YES	EVENT^IVMPLOG
COUNTY (.117)	AENR117	YES	EVENT^IVMPLOG
ZIP+4 (.1112)	AENR1112	YES	EVENT^IVMPLOG
PHONE NUMBER [RESIDENCE] (.131)	AENR131	YES	EVENT^IVMPLOG
PHONE NUMBER [WORK] (.132)	AENR132	YES	EVENT^IVMPLOG
INELIGIBLE DATE (.152)	AENR152	YES	EVENT^IVMPLOG

Trigger Events Implemented via Event Drivers

Event Driver	Event Protocol	New?	API Call
DG MEANS TEST EVENTS	DGEN AUTOMATIC ENROLLMENT UPDATE	NO	AUTOUPD^DGENA2

IVM Trigger Events

The following IVM events in **V***IST***A** will trigger an HL7 Full Data Transmission (ORU~Z07) message to be sent to the HEC for a patient.

Trigger Events Implemented via File Cross-References

File/Field #	Cross-Reference	New?	Function Call
PATIENT (#2) FILE			
NAME (.01)	IVM01	NO	DPT^IVMPXFR
SEX (.02)	IVM02	NO	DPT^IVMPXFR
DATE OF BIRTH (.03)	IVM03	NO	DPT^IVMPXFR
SOCIAL SECURITY NUMBER (.09)	IVM09	NO	DPT^IVMPXFR
STREET ADDRESS [LINE 1] (.111)	IVM111	NO	DPT^IVMPXFR
STEEET ADDRESS [LINE 2] (-112)	IVM112	NO	DPT^IVMPXFR
STREET ADDRESS [LINE 3] (.113)	IVM113	NO	DPT^IVMPXFR
CITY (.114)	IVM114	NO	DPT^IVMPXFR
STATE (.115)	IVM115	NO	DPT^IVMPXFR
COUNTY (.117)	IVM117	NO	DPT^IVMPXFR
ZIP+4 (.1112)	IVM1112	NO	DPT^IVMPXFR
PHONE NUMBER [RESIDENCE] (.131)	IVM131	NO	DPT^IVMPXFR
PHONE NUMBER [WORK] (.132)	IVM132	NO	DPT^IVMPXFR
DATE OF DEATH (.351)	IVM351	NO	DPT^IVMPXFR

Trigger Events Implemented via File Event Drivers

Event Driver	Event Protocol	New?	Function Call
DG MEANS TEST EVENTS	IVM MEANS TEST EVENT	NO	EN^IVMPMTE

Trigger Events Implemented via Routine Hook

Routine Name	API Call (Hook)	New?	Description
DGNTAPI	FILENTR^DGNTAPI	Yes	Call to create a new NTR HISTORY FILE (#28.11) entry. Will also queue HL7 message for HEC database updates.
DGRPEIS2	LOGDCD^IVMCUC	YES	Routine hook will monitor changes to the fields contained on Screen #9 (Income Screening Data) of the Registration module.

Appendix B - HL7 Segment Table Definitions

For each HL7 segment, the data elements contained in the segment are described in table format. These tables are described in the following sections. The abbreviated column headings contained in the tables and associated HL7 data types are also defined.

HL7 Abbreviated Column Headings

Column Heading	Definition
SEQ	Sequence of data element in segment
LEN	Maximum length of data element
DT	Data Type
R/O	Required/Optional (R = Required, blank = Optional)
RP/#	Repeats/Maximum number of repetitions (Y for repeats)
TBL#	Number of corresponding HL7 user defined/supported table

HL7 Data Types

Data Type (DT)	Definition	VA FileMan Data Type
AD	Address	Free Text
CE	Coded Element	Set of Codes or Pointer
CK	Check Digit	No Equivalent
CM	Composite	No Equivalent
DT	Date	Date Only
ID	Coded Value	Set of Codes or Pointer
IS	Coded Value for user-defined tables	Set of Codes or Pointer
NM	Numeric	Numeric
PN	Person Name	Free Text
TM	Time	Time Only
TN	Telephone Number	Free Text
TS	Time Stamp	Date/Time
TX	Text	Word processing
SI	Sequence ID	Numeric
ST	String	Free Text

HL7 Segment Tables

Insurance Segment (IN1)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	**VISTA** Element Name VISTA File Field or Expression
1	4	SI	R			Set ID-Insurance	Sequential number.
2	8	ID				Insurance Plan ID	Not used at this time.
3	6	ST				Insurance Company ID	Not used at this time.
4	45	ST	R			Insurance Company Name	NAME field (#.01) of INSURANCE COMPANY (#36) file.
5	106	AD				Insurance Company Address	ADDRESS fields (#.111-.116) of INSURANCE COMPANY (#36) file.
6	48	PN				Insurance Co. Contact Pers	Not used at this time.
7	40	TN				Insurance Co. Phone Number	PHONE NUMBER field (#.131) of INSURANCE COMPANY (#36) file.
8	12	ST	*R			Group Number	GROUP NUMBER field (.04) of GROUP INSURANCE PLAN file. (#355.3).
9	35	ST	*R			Group Name	GROUP NAME Field (.03) of GROUP INSURANCE PLAN file (#355.3).
10	12	ST				Insured's Group Emp. ID	Not used at this time.
11	45	ST				Insured's Group Emp. Name	Not used at this time.
12	8	DT				Plan Effective Date	EFFECTIVE DATE OF POLICY (Mult .312, Field #8) of PATIENT (#2) file.
13	8	DT				Plan Expiration Date	INSURANCE EXPIRATION DATE (Mult .312, Field #4) of PATIENT (#2) file.
14	55	ST				Authorization Information	Not used at this time.
15	2	ID				Plan Type	TYPE OF PLAN field (#.09), of GROUP INSURANCE PLAN (#355.3) file.
16	48	PN	*R			Name of Insured	NAME OF INSURED (Mult .312, Field #6) (Mult. .312, Field #17) of PATIENT (#2) file.
17	2	ID	R			Insured's Relation To Patient	WHOSE INSURANCE field of PATIENT (#2) file.
18	8	DT				Insured's Date of Birth	Not used at this time.
19	106	AD				Insured's Address	Not used at this time.
20	2	ID				Assignment of Benefits	Not used at this time.
21	2	ID				Coordination of Benefits	Not used at this time.
22	2	ST				Cord. of Benefits Priority	Not used at this time.
23	2	ID				Notice of Admission Code	Not used at this time.
24	8	DT				Notice of Admission Date	Not used at this time.
25	2	ID				Rpt of Eligibility Code	Not used at this time.
26	8	DT				Rpt of Eligibility Date	Not used at this time.
27	2	ID				Release of Information Code	Not used at this time.
28	1	IS			VA01	Pre-Admit Cert. (Pac)	IS PRE-CERT. REQ. field (#.06) of GROUP INSURANCE PLAN file (#355.3).
29	8	DT				Verification Date	Not used at this time.
30	60	CM				Verification By	Not used at this time.
31	2	ID				Type of Agreement Code	Not used at this time.

Insurance Segment (IN1), continued

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	V*IST*A Element Name V*IST*A File Field or Expression
32	2	ID				Billing Status	Not used at this time.
33	4	NM				Lifetime Reserve Days	Not used at this time.
34	4	NM				Delay Before L. R. Day	Not used at this time.
35	8	ST				Company Plan Code	Not used at this time.
36	15	ST	R			Policy Number	INSURANCE NUMBER (Mult 2.312, Field #1) of PATIENT (#2) file.
37	12	NM				Policy Deductible	Not used at this time.
38	12	NM				Policy Limit – Amount	Not used at this time.
39	4	NM				Policy Limit – Days	Not used at this time.
40	12	NM				Room Rate - Semi Private	Not used at this time.
41	12	NM				Room Rate – Private	Not used at this time.
42	1	ID				Insured's Employment Status	Not used at this time.
43	1	ID				Insured's Sex	Not used at this time.
44	106	AD				Insured's Employer Address	Not used at this time.

- Field SEQ 8 and field SEQ 9 – At a minimum, one of these fields is required.
- Field SEQ 16 – This field is required if field SEQ 17 does not contain a "v" for veteran.

Notes and Comments Segment (NTE)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	**V***IST***A** Element Name ANNUAL MEANS TEST (#408.31) File Field or Expression
1	4	SI	R			Set ID	Sequential number
2	8	ID			105	Source of Comment	Not used at this time.
3	120	TX				Comment	COMMENT field (#50)

Patient Identification Segment (PID)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	**V***IST***A** Description PATIENT (#2) File Field or Expression
1	4	SI				Set ID – Patient ID	Sequential Number
2	16	CK				Patient ID (External ID)	PRIMARY LONG ID field (#.363) or VA(“PID”)
3	16	CM	R	Y		Patient ID (Internal ID)	Pointer to entry in PATIENT (#2) file
4	12	ST				Alternate Patient ID	PRIMARY SHORT ID field (#.364) or VA(“PID)
5	48	PN	R			Patient Name	NAME field (#.01)
6	30	ST				Mother's Maiden Name	MOTHER’S MAIDEN NAME field (#.2403)
7	26	TS				Date of Birth	DATE OF BIRTH (#.03)
8	1	ID			0001	Sex	SEX (#.02)
9	48	PN		Y		Patient Alias	ALIAS (Multiple 1, Field #.01)
10	1	ID			VA07	Race	Race
11	106	AD		Y		Patient Address	ADDRESS field (#.111-.116)
12	4	IS				County Code	VA COUNTY CODE field (#.117)
13	40	TN		Y		Phone Number – Home	PHONE NUMBER (RESIDENCE) field (#.131)
14	40	TN		Y		Phone Number – Business	PHONE NUMBER (WORK) field (#.132)
15	25	ST				Language – Patient	Not used
16	1	ID			0002	Marital Status	MARITAL STATUS field (#.05)
17	3	IS			VA08	Religion	Religion
18	20	CK				Patient Account Number	Not used
19	16	ST				SSN Number – Patient	SOCIAL SECURITY NUMBER field (#.09)
20	25	CM				Driver's Lic Num – Patient	Not used
21	20	CK				Mother's Identifier	Not used
22	1	ID			0189	Ethnic Group	Not used
23	25	ST				Birth Place	Not used
24	2	ID				Multiple Birth Indicator	Not used
25	2	NM				Birth Order	Not used
26	3	ID		Y	0171	Citizenship	Not used
27	60	CE			0172	Veterans Military Status	Not used

Query Definition Segment (QRD)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	V*IST*A Description
1	26	TS	R			Query Date/Time	Date/Time query was generated.
2	1	ID	R		0106	Query Format Code	See HL7 Table For Codes.
3	1	ID	R		0091	Query Priority	See HL7 Table For Codes.
4	10	ST	R			Query ID	**V*IST*A-**specific internal entry number of PATIENT (#2) file.
5	1	ID				Deferred Response Type	Not used at this time.
6	26	TS				Deferred Response Date/Time	Not used at this time.
7	10	CQ	R		0126	Quantity Limited Request	See HL7 Table for codes.
8	20	ST	R			Who Subject Filter	SOCIAL SECURITY NUMBER (#.09) field of PATIENT (#2) file.
9	3	ID	R	Y	0048	What Subject Filter	See HL7 Table for codes.
10	20	ST	R	Y		What Department Data Code	Computed Field (Income Year).
11	20	ST	R	Y		What Data Code Value	Not used at this time.
12	1	ID			0108	Query Results Level	See HL7 Table for codes.

Observation/Result Segment (OBX)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA DESCRIPTION
1	10	SI	O			Set ID - OBX	Not used
2	2	ID	C		0125	Value Type	CE
3	590	CE	R			Observation Identifier	38.1^SECURITY LOG (patient security) VISTA~28.11 (NTR)
4	20	ST	C			Observation Sub-ID	Not used
5	65536[1]	*	C	Y[2]		Observation Value	Sensitive = Y (patient security) Not Sensitive = N (patient security) NOTE: This will be a repeating field for NTR. <identifier (ST)>~<text (ST)>~<name of coding system (ST)>|<identifier #2 (ST)>~<text #2(ST)>~<name of coding system #2(ST)>|etc…
6	60	CE	O			Units	Not used
7	10	ST	O			References Range	Not used
8	5	ID	O	Y/5	0078	Abnormal Flags	Not used
9	5	NM	O			Probability	Not used
10	2	ID	O	Y	0080	Nature of Abnormal Test	Not used
11	1	ID	R		0085	Observ Result Status	R=Results entered, Not verified (patient security) F=Final Results (NTR)
12	26	TS	O			Date Last Obs Normal Values	Diagnosed With Head and Neck Cancer Date/Time (NTR)
13	20	ST	O			User Defined Access Checks	Not used
14	26	TS	O			Date/Time of the Observation	Date/Time of the Observation (patient security) Verification Method Date/Time (NTR)
15	60	CE	O			Producer's ID	Station Number of Site Reporting Verification Method Status (NTR)
16	80	XCN	O			Responsible Observer	'Security Assigned Remotely By' = AAC (patient security) Component #14, Sub-Component #2 - Station Number of Site Reporting Diagnosed With Head and Neck Cancer Status (NTR)
17	60	CE	O	Y		Observation Method	Verification Method: (NTR) S (Qual Military Srvc) M (Military Med Rec) N (Not Qualified)

[1] The length of the observation value field is variable, depending upon value type. See Sequence 2 in OBX table above.

[2] May repeat for multipart, single answer results with appropriate data types, e.g., CE, TX, and FT data types.

Query Filter Segment (QRF)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Description
1	20	ST	R	Y		Where Subject Filter	Identifies Dept., System to Which Query Pertains
2	19	TS				When Data Start Date/Time	Not used at this time
3	20	TS				When Data End Date/Time	Not used at this time
4	20	ST		Y		What User Qualifier	Specific Patient Date of Birth
5	20	ST		Y		Other Query Subject Filter	Specific Patient Sex; “M” or “F”

VA-Specific Beneficiary Travel Segment (ZBT)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Element Name VISTA BENEFICIARY TRAVEL CERTIFICATION File (#392.2) Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	8	DT				Date Certified	Date Certified field (#.01) of File #392.2
3	1	IS			VA01	Eligible	Eligible field (#3) of File #392.2
4	10	NM				Amount Certified	Amount Certified field (#4) of File #392.2
5	2	IS			VA02	Means Test Status	Means Test Status (A;8) of File #392.2
6	2	IS			VA04	Primary Eligibility Code	Primary Elig. Code (A;9) of File #392.2
7	19	TS				Travel Claim Date/Time	Claim Date/Time (#.01) of File #392
**Fields are from BENEFICIARY TRAVEL CLAIM file (#392).							

VA-Specific Catastrophic Disability Segment (ZCD)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID	SEQUENTIAL NUMBER
2	8	DT	R			Review Date	REVIEW DATE (.394)
3	35	ST	R			Decided by	DECIDED BY (.391)
4	7	ID	R		VA0115	Facility Making Determination	FACILITY MAKING DETERMINATION (.393)
5	8	DT	R			Date of Decision	DATE OF DECISION (.392)
6	60	CE	R		VA0041	Determination Method	METHOD OF DETERMINATION field (#new field) of the PATIENT file (#2)
7	60	CE	O			CD Diagnosis	DIAGNOSIS field (#new field) of the PATIENT file (#2)
8	60	CE	O			CD Procedure	PROCEDURE field (#new field) of the PATIENT file (#2)
9	60	CE	O		VA0042	Affected Extremity	AFFECTED EXTREMITY (#new field) of the PATIENT file (#2)
10	4	CE	O		VA0043	CD Condition	CONDITION field (#new field) in the PATIENT file (#2)
11	6	ST	O			Score	SCORE [NEW FIELD]. Valid Value any whole number.
12	1	ID	R		0136	Catastrophically Disabled	VETERAN CATASTROPHICALLY DISABLED (#new field)
13	60	CE	O		VA0045	Permanent Indicator	PERMANENT INDICATOR field (#new field) in the PATIENT file (#2)

VA-Specific Emergency Contact Segment (ZCT)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	V*IST*A Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	2	ID	R			Contact Type	1=NOK, 2=2nd NOK, 3=E-Contact, 4=2nd E-Contact, 5=Designee
3	35	ST				Contact Name	Name of Contact Person (See note below.)
4	30	ST				Contact Relationship	Relationship to Patient of Contact Person (See note below.)
5	106	AD				Contact Address	Address of Contact Person (See note below.)
6	40	TN				Contact Phone Number	Phone Number of Contact Person (See note below.)
7	40	TN				Contact Work Phone Number	Work Phone Number of Contact Person (See note below.)
8	1	IS			VA01	Contact Address Same As NOK?	Address Same as Patient's (See Note - NOK And NOK2 Only)
9	1	IS			VA01	Contact Person Same As NOK?	Same as NOK? (See Note – First E-Contact And Designee Only)
Data is returned from various PATIENT file nodes based on the CONTACT TYPE: Type=1, Node=.21; Type=2, Node=.211; Type=3, Node=.33; Type=4, Node=.331; Type=5, Node=34.							

VA-Specific Patient Dependent Information Segment (ZDP)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	V*IST*A Element Name V*IST*A Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	48	PN	R			Name	* NAME field (#.01)
3	1	ID			0001	Sex	* SEX field (#.02)
4	8	DT				Date of Birth	* DATE OF BIRTH field (#.03)
5	16	ST				Social Security Number	* SOCIAL SECURITY NUMBER field (#.09)
6	2	IS			VA09	Relationship To Patient	RELATIONSHIP (#.02) field of PATIENT RELATION (#408.12) file (internal value)
7	10	NM				Internal Entry Number	Internal Entry Number of PATIENT RELATION (#408.12) file
8	30	ST				Spouse's Maiden Name	No corresponding **V*IST*A** field at this time.
9	8	DT				Dependent Date	EFFECTIVE DATE (Mult 408.1275; Field #.01)
*Fields are from either PATIENT(#2) or INCOME PERSON (#408.13) files.							

VA-Specific Patient Eligibility Segment (ZEL)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID	Sequential Number (1 is always Primary Elig.)
2	2	IS			VA04	Eligibility Code	Eligibility Code
3	16	CK				Long ID	Long ID (Multiple 361, Field #.01)
4	12	ST				Short ID	Short ID (Multiple 361, Field #.04)
5	1	IS			VA05	Disability Retirement From Mil	DISABILITY RET. FROM MILITARY? field (#.362)
6	8	NM				Claim Folder Number	CLAIM FOLDER NUMBER field (#.313)
7	40	ST				Claim Folder Location	*CLAIM FOLDER LOCATION field (#.312)
8	1	IS			VA01	Veteran?	VETERAN? field (#1901)
9	30	ST				Type of Patient	TYPE OF PATIENT field (#391)
10	1	IS			VA06	Eligibility Status	ELIGIBILITY STATUS field (#.3611)
11	8	DT				Eligibility Status Date	ELIGIBILITY STATUS DATE field (#.3612)
12	8	DT				Eligibility Interim Response	ELIGIBILITY INTERIM RESPONSE field (#.3614)
13	50	ST				Eligibility Verification Method	ELIGIBILITY VERIFICATION METHOD field (#.3615)
14	1	IS			VA01	Receiving A&A Benefits?	RECEIVING A&A BENEFITS? field (#.36205)
15	1	IS			VA01	Receiving Housebound Benefits?	RECEIVING HOUSEBOUND BENEFITS? field (#.36215)
16	1	IS			VA01	Receiving A VA Pension?	RECEIVING VA PENSION? field (#.36235)
17	1	IS			VA01	Receiving A VA Disability?	Receiving VA Disability? field (#.3025)
18	1	IS			VA01	Exposed To Agent Orange	AGENT ORANGE EXPOS. INDICATED field (#.32102)
19	1	IS			VA01	Radiation Exposure Indicated	RADIATION EXPOSURE INDICATED? field (#.32103)
20	1	IS			VA01	Environmental Contaminants	ENVIRONMENTAL CONTAMINANTS? field (#.322013)
21	8	NM				Total Annual VA Check Amount	TOTAL ANNUAL VA CHECK AMOUNT field (#.36295)

VA-Specific Employment Information Segment (ZEM)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	1	ID				Employment Person	1 if Patient, 2 if Spouse
3	2	IS			VA03	Employment Status	Employment Status: Patient (#.31115) or Spouse (#.2515)
4	30	ST				Employer Name	Employer Name: Patient (#.3111) or Spouse (#.251)
5	30	ST				Occupation	Occupation (#.07) or Spouse's Occupation (#.2514)
6	106	AD				Employer Address	Employer Address: Patient (#.3113-#.3118) or Spouse (#.252-#.257)
7	40	TN				Employer Phone	Employer Phone Number: Patient (#.3119) or Spouse (#.258)
8	1	IS			VA01	Government Agency	Government Agency (#.3112) (Patient Only)

VA-Specific Enrollment Segment (ZEN)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Element Name VISTA Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	8	DT				Enrollment Date	ENROLLMENT DATE field (#.1) of ENROLLMENT file (#27.11)
3	1	ID				Source of Enrollment	SOURCE OF ENROLLMENT field (#.03) of ENROLLMENT file (#27.11) 1 = VAMC; 2 = HEC; 3 = Other VAMC
4	1	IS			VA15	Enrollment Status	ENROLLMENT STATUS field (#.04) of ENROLLMENT file (#27.11)
5	2	IS			VA16	Reason Canceled/Declined	REASON CANCELED/DECLINED field #.05) of ENROLLMENT file (#27.11)
6	60	TX				Canceled/Declined Remarks	CANCELED/DECLINED REMARKS field (#25) of ENROLLMENT file (#27.11)
7	7	IS			VA0115	Facility Received	FACILITY RECEIVED field (#.06) of ENROLLMENT file (#27.11)
8	7	IS			VA0115	Preferred Facility	PREFERRED FACILITY field (#27.02) of PATIENT file (#2)
9	1	IS			VA17	Enrollment Priority	ENROLLMENT PRIORITY field (#.07) of ENROLLMENT file (#27.11)
10	8	DT				Effective Date	EFFECTIVE DATE field (#.08) of ENROLLMENT file (#27.11)
11	8	DT				Enrollment Application Date	ENROLLMENT APPLICATION DATE field (#.01) of ENROLLMENT file (#27.11)
12	8	DT				Enrollment End Date	ENROLLMENT END DATE field (#.11) of ENROLLMENT file (#27.11)
13	1	IS			VA0035	Enrollment Sub-group	ENROLLMENT SUB-GROUP field (#.12) of the ENROLLMENT file (#27.11)

VA-Specific Fee Basis Segment (ZFE)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Element Name VISTA Field or Expression
1	4	ST	R			Set ID	Sequential Number
2	200	CE	O		VA0033	Treatment Code	Treatment Code, shown as identifier and the name of the coding system. Ex: SHORT TERM FEE STATUS^^VA0033 is the identifier (SHORT TERM FEE STATUS) and the coding system (VA0033 table) The second piece of this string is null (text describing the identifier).
3	200	CE	R		VA0034	Fee Basis Program	Fee Basis Program, shown as the identifier and the name of the coding system. Ex: OUTPATIENT^^VA0034 is the identifier (OUTPATIENT) and the coding system (VA0034 table). The second piece of this string is null (text describing the identifier).
4	26	DT	O			Authorization From Date	Beginning date of the Fee Basis authorization The date must be Y2K compliant.
5	26	DT	O			Authorization To Date	Ending date of the Fee Basis authorization The date must be Y2K compliant.

VA-Specific Guardian Segment (ZGD)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	2	ID	R			Guardian Type	1=VA Guardian; 2=Civil Guardian
3	35	ST				Guardian Name	Name of Guardian (See Note Below.)
4	30	ST				Guardian Institution	Institution Where Guardian is Located (See Note Below.)
5	30	ST				Guardian Relationship	Relationship To Patient of Guardian (See Note Below.)
6	106	AD				Guardian Address	Address of Guardian (See Note Below.)
7	40	TN				Guardian Phone Number	Phone Number of Guardian (See Note Below.)
8	8	DT				Date Ruled Incompetent	Date Ruled Incompetent (See Note Below.)

Data is returned from a different PATIENT file (#2) node depending on the GUARDIAN TYPE:

- If the GUARDIAN TYPE=1, data will be returned from the .29 node.
- If the GUARDIAN TYPE=2, data will be returned from the .291 node.

VA-Specific Income Information Segment (ZIC)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA Element Name INDIVIDUAL ANNUAL INCOME (#408.21) File Field or Expression
1	4	SI	R			Set ID	Sequential Number (1 is always Primary Eligibility.)
2	8	DT				Income Year	YEAR field (#.01) (Month and Date will be 0.)
3	8	NM				Social Security	SOCIAL SECURITY (NOT SSI) field (#.08)
4	8	NM				Us Civil Service	U.S. CIVIL SERVICE field (#.09)
5	8	NM				Us Railroad Retirement	U.S. RAILROAD RETIREMENT field (#.1)
6	8	NM				Military Retirement	MILITARY RETIREMENT field (#.11)
7	8	NM				Unemployment Compensation	UNEMPLOYMENT COMPENSATION field (#.12)
8	8	NM				Other Retirement	OTHER RETIREMENT field (#.13)
9	9	NM				Employment Income	TOTAL INCOME FROM EMPLOYMENT field (#.14)
10	8	NM				Interest, Dividend, Annuity	INTEREST, DIVIDEND, ANNUITY field (#.15)
11	8	NM				Workers Comp/Black Lung	WORKERS COMP. OR BLACK LUNG field (#.16)
12	9	NM				Other Income	ALL OTHER INCOME field (#.17)
13	8	NM				Medical Expenses	MEDICAL EXPENSES field (#1.01) (Veteran Only)
14	8	NM				Funeral And Burial Expenses	FUNERAL AND BURIAL EXPENSES field (#1.02) (Veteran Only)
15	8	NM				Educational Expenses	EDUCATIONAL EXPENSES field (#1.03) (Veteran Only)

VA-Specific Income Information Segment (ZIC), continued

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA Element Name INDIVIDUAL ANNUAL INCOME (#408.21) File Field or Expression
16	9	NM				Cash, Amount In Bank Accounts	CASH, AMOUNTS IN BANK ACCOUNTS field (#2.01) (Vet/Spouse Only)
17	9	NM				Stocks And Bonds	STOCKS AND BONDS field (#2.02) (Vet/Spouse Only)
18	9	NM				Real Property	REAL PROPERTY field (#2.03) (Vet/Spouse Only)
19	9	NM				Other Property or Assets	OTHER PROPERTY OR ASSETS field (#2.04) (Vet/Spouse Only)
20	9	NM				Debts	DEBTS field (#2.05) (Vet/Spouse Only)
21	8	DT				Date Income Screening Collected	ENTERED ON field (#102)
22	8	DT				Site Conducting Test	SITE CONDUCTING TEST field (#.27 – Station Number)
23	8	DT				Source of Test	SOURCE OF TEST filed (#.23)
Note: Data in this segment should be formatted in the message to follow the corresponding ZDP or PID segment in order to indicate for which dependent this data is returned.							

VA-Specific Patient Ineligible Segment (ZIE)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	8	DT				Ineligible Date	INELIGIBLE DATE field (#.152)
3	40	ST				Ineligible Reason	INELIGIBLE REASON field (#.307)
4	75	ST				Ineligible VARO Decision	INELIGIBLE VARO DECISION field (#.1656)
5	30	ST				Ineligible Twx City	Not used at this time.
6	1	ID				Ineligible Twx Source	Not used at this time.
7	4	ID				Ineligible Twx State	Not used at this time.

VA-Specific Inpatient/Outpatient Information Segment (ZIO)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA Element Name VISTA Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	3	NM				Number of Inpatient Days Since Last Means Test	Computed field
3	3	NM				Number of Outpatient Days Since Last Means Test	Computed field
4	8	DT				Date of Last Visit	Computed field (Last Opt or Inpatient Stay)

VA-Specific Income Relation Segment (ZIR)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Element Name INCOME RELATION (#408.22) File Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	1	IS			VA01	Married Last Calendar Year	MARRIED LAST CALENDAR YEAR field (#.05)
3	1	IS			VA01	Lived With Patient	LIVED WITH PATIENT field (#.06)
4	8	NM				Amount Contributed to Spouse	AMOUNT CONTRIBUTED TO SPOUSE field (#.07)
5	1	IS			VA01	Dependent Children	DEPENDENT CHILDREN field (#.08)
6	1	IS			VA01	Incapable of Self Support	INCAPABLE OF SELF-SUPPORT field (#.09)
7	1	IS			VA01	Contributed to Support	CONTRIBUTED TO SUPPORT field (#.1)
8	1	IS			VA01	Child Had Income	CHILD HAD INCOME field (#.11)
9	1	IS			VA01	Income Available to You	INCOME AVAILABLE TO YOU field (#.12)
10	2	NM				Number of Dependent Children	NUMBER OF DEPENDENT CHILDREN field (#.13)

VA-Specific Message Processing Segment (ZIV)

SEQ	LEN	DT	R/O	RP/#	TBL #	ELEMENT NAME	VISTA ELEMENT NAME VISTA Field or Expression
1	4	SI	R			SET ID	Sequential number
2	8	DT	*R			INCOME YEAR	YEAR (.01) Individual Annual Income (#408.21) file.
3	2	ID				CLIENT ID ERROR MESSAGE	No corresponding VistA field at this time.
4	16	ST				NEW CLIENT SSN	SSN (.09) Patient (#2) file.
5	2	ID				SPOUSE ID ERROR MESSAGE	No corresponding VistA field at this time.
6	16	ST				NEW SPOUSE SSN	SSN (.09) Income Person (#408.13) file.
7	16	CK				SPOUSE ID (INTERNAL ENTRY NUMBER)	Internal Entry Number of PATIENT RELATION (#408.12) file.
8	2	ID				IVM CASE STATUS	No corresponding VistA field at this time.
9	16	CK				IVM ID (INTERNAL)	No corresponding VistA field at this time.
10	1	ID				INSURANCE UPLOAD STATUS	Computed (1=Uploaded, 0=Rejected)
11	2	ID				REASON INS. NOT UPLOADED	REASON CODE (.01) of IVM Reasons for Not Uploading Ins. (#301.91) file
12	19	TS				CLIENT DATE OF DEATH	DATE OF DEATH (.351) Patient (#2) file.

VA-Specific Means Test Information Segment (ZMT)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA Element Name ANNUAL MEANS TEST (#408.31) File Field or Expression
1	4	SI	R			*Set ID - Patient ID	Sequential Number (1= Means Test, 2 = Copay Test)
2	8	DT				Means Test Date	DATE OF TEST field (#.01)
3	2	IS			VA02	Means Test Status	STATUS field (#.03)
4	10	NM				Income	INCOME field (#.04)
5	10	NM				Net Worth	NET WORTH field (#.05)
6	19	TS				Date/Time of Adjudication	ADJUDICATION DATE/TIME field (#.1)
7	1	IS			VA01	Agreed to Pay Deductible	AGREED TO PAY DEDUCTIBLE field (#.11)
8	8	NM				Threshold A	THRESHOLD A field (#.12)
9	10	NM				Deductible Expenses	DEDUCTIBLE EXPENSES field (#.15)
10	19	TS				Date/Time MT Completed	DATE/TIME COMPLETED field (#.07)
11	1	IS			VA01	Previous Yr MT Threshold Flag	PREVIOUS YEARS THRESHOLD field (#.16)

12	2	NM				Total Dependents	TOTAL DEPENDENTS field (#.18)
13	1	IS			VA01	Hardship	HARDSHIP field (#.2)
14	8	DT				Hardship Review Date	HARDSHIP REVIEW DATE field (#.21)
15	19	TS				Date Veteran Signed Test	DATE VETERAN SIGNED TEST field (#.24)
16	1	IS			VA01	Declines to Give Income Info	DECLINES TO GIVE INCOME INFO field (#.14)
17	1	ID				Type of Test	TYPE OF TEST field (#.019) (1 = Means Test, 2=Copay Test)
18	1	ID				***Source of Test	SOURCE OF TEST field (#.23) (1=VAMC, 2=IVM)

VA-Specific Means Test Information Segment (ZMT), continued

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA Element Name ANNUAL MEANS TEST (#408.31) File Field or Expression
19	1	IS			VA01	Primary Test?	PRIMARY INCOME TEST FOR YEAR? field (#2)
20	8	DT				Date IVM Verif. MT Completed	DATE IVM VERIFIED MEANS TEST COMPLETED field (#.25)
21	1	IS			VA01	Refused To Sign	REFUSED TO SIGN field (#.26)
22	3	NM				****Site Conducting Test	Station Number
23	3	NM				Hardship Review Site	Station Number
24	8	DT				Hardship Effective Date	HARDSHIP EFFECTIVE DATE field (#2.01)
25	19	Ts				Date/Time Last Edited	DATE/TIME LAST EDITED filed (#2.02)
26	2	IS			VA 02	Test-determined Status	TEST-DETERMINED STATUS filed (#2.03)

Notes:
* Deletion of a Test: SEQ 1 indicates the type of test to delete.
SEQ 2 will be used to indicate which income year test to delete. The income year is the year prior to the date of the means test.
SEQ 3 = HLQ will indicate that the test should be deleted.
** Deletion of a Hardship Determination:
SEQ 24 = HLQ will indicate that the hardship determination should be deleted.
SEQ 2 will be used to indicate for which income year to delete the hardship determination . The income year is the year prior to the date of the means test.

VA-Specific Patient Information Segment (ZPD)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID - Patient ID	Sequential Number
2	60	ST				Remarks	REMARKS field (#.091)
3	20	ST				Place of Birth City	PLACE OF BIRTH CITY field (#.092)
4	2	ST				Place of Birth State	PLACE OF BIRTH STATE field (#.093) (Abbreviation Only)
5	2	IS			VA02	Current Means Test Status	CURRENT MEANS TEST STATUS field (#.14)
6	35	ST				Father's Name	FATHER'S NAME field (#.2401)
7	35	ST				Mother's Name	MOTHER'S NAME field (#.2402)
8	1	IS			VA01	Rated Incompetent	RATED INCOMPETENT field (#.293)
9	19	TS				Date of Death	DATE OF DEATH field (#.351)
10	48	PN				Collateral Sponsor	COLLATERAL SPONSOR field (#.3601)
11	1	IS			VA01	Active Health Insurance?	Active Health Insurance? (Computed)
12	1	IS			VA01	Eligible For Medicaid?	ELIGIBLE FOR MEDICAID? field (#.381)
13	19	TS				Date Medicaid Last Asked	DATE MEDICAID LAST ASKED field (#.382)
14	1	IS			VA07	Race	RACE field (#.06)
15	3	IS			VA08	Religion	RELIGION field (#.08)
16	1	IS			VA01	Homeless Indicator	Homeless Indicator (Computed)
17	1	ST				POW Status Indicated?	POW STATUS INDICATED? field (#.525) (Y = Yes; N = No; U = Unknown)
18	2	IS			VA12	Type of Insurance	Type of Insurance (Computed)
19	1	IS			VA14	Medication Copayment Exemption Status	Medication Copay Exemption Status (Computed)

VA-Specific Rated Disabilities Segment (ZRD)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	V*IST*A Element Name PATIENT (#2.3721) Sub-File Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	4	CE				Disability Condition *(See below.)	RATED DISABILITIES (VA) field (#.01)
3	3	NM				Disability %	DISABILITY % field (#2)
4	1	IS			VA01	Service Connected Rated Disability	SERVICE CONNECTED field (#3)

* DISABILITY CONDITION has the coded element data type, which is one of the composite data types. The '~' is always used within the IVM and Enrollment packages as the component separator. The general format for the coded element data type, from the 2.3 version of the HL7 standard, is:

```
<identifier (ST)>~<text (ST)>~<name of coding system (ST)>~<alternate identifier (ST>~
```

The actual format for the DISABILITY CONDITION is:

```
<4-digit DX CODE from the Disability Condition file (#31)>~<45 character NAME field from the
Disability Condition file>
```

If the DISABILITY CONDITION field is included in the segment than both of its components are required.

Here is an example of the ZRD segment: **ZRD^1^5001~BONE DISEASE^30^1**

VA-Specific Service Period Segment (ZSP)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	V*IST*A Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID	Sequential Number
2	1	IS	R		VA01	Service Connected?	SERVICE CONNECTED? field (#.301)
3	3	NM				Service Connected Percentage	SERVICE CONNECTED PERCENTAGE field (#.302)
4	2	IS			VA11	Period of Service	PERIOD OF SERVICE field (#.323)
5	1	ST				Vietnam Service Indicated?	VIETNAM SERVICE INDICATED? field (#.32101)
6	1	IS			VA01	P&T	P&T field (#.304)
7	1	IS			VA01	Unemployable	UNEMPLOYABLE field (#.305)
8	19	TS				SC Award Date	SC AWARD DATE field (#.3012)

VA-Specific Temporary Address Segment (ZTA)

SEQ	LEN	DT	R/O	RP/#	TBL #	Element Name	VISTA Element Name PATIENT (#2) File Field or Expression
1	4	SI	R			Set ID - Patient ID	Sequential Number
2	1	IS			VA01	Temporary Address?	TEMPORARY ADDRESS ENTER/EDIT? field (#.12105)
3	8	DT				Temporary Address Start	TEMPORARY ADDRESS START DATE field (#.1217)
4	8	DT				Temporary Address End	TEMPORARY ADDRESS END DATE field (#.1218)
5	106	AD				Temporary Address	TEMPORARY ADDRESS fields (#.1211-.1216)
6	4	ID				Temporary Address County	TEMPORARY ADDRESS COUNTY field (#.12111)
7	40	TN				Temporary Address Phone	TEMPORARY PHONE NUMBER field (#.1219)

Batch Header Segment (BHS)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	VISTA Description
1	1	ST	R			Batch Field Separator	Recommended value is ^ (caret)
2	4	ST	R			Batch Encoding Characters	Recommended delimiter values: Component = ~ (tilde) Repeat = | (bar) Escape = \ (back slash) Subcomponent = **&** (ampersand)
3	15	ST				Batch Sending Application	When originating from facility: **IVM** When originating from HEC: **IVM CENTER**
4	20	ST				Batch Sending Facility	When originating from facility: **Station's facility number** When originating from HEC: **724**
5	15	ST				Batch Receiving Application	When originating from facility: **IVM CENTER** When originating from HEC: **IVM**
6	20	ST				Batch Receiving Facility	When originating from facility: **724** When originating from HEC: **Station's facility number**
7	26	TS				Batch Creation Date/Time	Date and time batch message was created
8	40	ST				Batch Security	Not used

Batch Header Segment (BHS), continued

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	V*IST*A Description
9	20	ST				Batch Name/ID/Type	4 Components: Component 1: Batch Name (Not used) Component 2: Processing ID Component 3: Message Type Component 4: Version ID *These 4 components must be separated by the HL7 component separator. The processing ID, message type, and version ID correspond to fields of the same name in the MSH segment*
10	80	ST				Batch Comment	2 Components: Component 1: *Refer to Table 0008* Component 2: Text Message
11	20	ST				Batch Control ID	Automatically generated by **V*IST*A** HL7 Package
12	20	ST				Reference Batch Control ID	Batch Control ID of batch message being acknowledged

Batch Trailer Segment (BTS)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	V*IST*A Description
1	10	ST				Batch Message Count	Number of messages within the batch message
2	80	ST				Batch Comment	Not used at this time
3	100	CM		Y		Batch Totals	Not used at this time

Message Header Segment (MSH)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	V*IST*A Description
1	1	ST	R			Field Separator	Recommended value is ^ (caret)
2	4	ST	R			Encoding Characters	Recommended delimiter values: Component = ~ (tilde) Repeat = | (bar) Escape = \ (back slash) Subcomponent = **&** (ampersand)
3	15	ST				Sending Application	When originating from facility: **IVM** When originating from HEC: **IVM CENTER**
4	20	ST				Sending Facility	When originating from facility: **Station's facility number** When originating from HEC: **724**
5	30	ST				Receiving Application	When originating from facility: **IVM CENTER** When originating from HEC: **IVM**

Message Header Segment (MSH) , continued

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	V*IST*A Description
6	30	ST				Receiving Facility	When originating from facility: **724** When originating from HEC: **Station's facility number**
7	26	TS				Date/Time of Message	Date and time message was created
8	40	ST				Security	Not used
9	7	CM	R		0076	Message Type	2 Components: Component 1: *Refer to Table 0076* Component 2: *Message Event Type Code*
10	20	ST	R			Message Control ID	Automatically generated by **V*IST*A** HL7 Package
11	1	ID	R		0103	Processing ID	**P** (Production)
12	8	ID	R		0104	Version ID	**2.1** (Version 2.1)
13	15	NM				Sequence Number	Not used at this time
14	180	ST				Continuation Pointer	Not used at this time
15	2	ID			0155	Accept Acknowledgment Type	Not used at this time
16	2	ID			0155	Application Acknowledgment Type	Not used at this time
17	2	ID				Country Code	Not used at this time

Message Acknowledgment Segment (MSA)

SEQ	LEN	DT	R/O	RP/#	TBL#	Element Name	V*IST*A Description
1	2	ID	R		0008	Acknowledgment Code	*Refer to Table 0008*
2	20	ST	R			Message Control ID	Message Control ID of message being acknowledged
3	80	ST				Text Message	Error text denoting why the message was rejected
4	15	NM				Expected Sequence Number	Not used
5	1	ID			0102	Delayed Acknowledgment Type	Not used
6	100	CE				Error Condition	Not used

Supported/User-Defined HL7 Tables

Table 0001 - Sex

Value	Description
F	FEMALE
M	MALE
O	OTHER
U	UNKNOWN

Table 0002 - Marital Status

Value	Description
A	SEPARATED
D	DIVORCED
M	MARRIED
S	SINGLE
W	WIDOWED

Table 0008 Acknowledgment code

Value	Description
AA	Original Mode: Application Accept Enhanced Mode: Application Acknowledgment: Accept
AE	Original Mode: Application Error Enhanced Mode: Application Acknowledgment: Error
AR	Original Mode: Application Reject Enhanced Mode: Application Acknowledgment: Reject
CA	Enhanced Mode: Accept Acknowledgment: Commit Accept
CE	Enhanced Mode: Accept Acknowledgment: Commit Error
CR	Enhanced Mode: Accept Acknowledgment: Commit Reject

Table VA0052 – NTR Verification Method

Value	Description
S	Qual Military Srvc (Qualifying Military Service)
M	Military Med Rec (Military Medical Record)
N	Not Qualified

Table VA0053 – NTR Qualifiers

Value	Description
1	Received NTR Trmt (Received NTR Treatment)
2	Aviator Pre 1955 (Aviator Prior to 1955)
3	Sub Trainee pre 1965 (Navy Sub Trainee Prior 1965)
4	Dx With Head Neck Cancer (Diagnosed With Head and Neck Cancer)
5	No NTR Trmt (No NTR Treatment)
6	Not Aviator Pre 1955 (Not Aviator Prior to 1955)
7	Not Sub Trainee pre 1965 (Not Navy Sub Trainee Prior 1965)
8	Not Dx With Head Neck Cancer (Not Diagnosed With Head and Neck Cancer)
9	NTR Trmt Unknown (NTR Treatment Unknown)

Table 0076 - Message Type

Value	Description
ADT	ADT MESSAGE
ACK	GENERAL ACKNOWLEDGMENT
ORF	OBSERV. RESULT/RECORD RESPONSE
ORU	OBSERV RESULT/UNSOLICITED
QRY	QUERY

Note: This is not the complete table. It contains those message types used by the VISTA/HEC interface.

Table 0103 - Processing ID

Value	Description
D	DEBUGGING
P	PRODUCTION
T	TRAINING

Table 0104 - Version ID

Value	Description

2.0	RELEASE 2.0
2.0D	DEMO 2.0
2.1	RELEASE 2.1
2.2	RELEASE 2.2

Table VA01 - Yes/No

Value	Description
0	NO
1	YES

Table VA02 - Current Means Test Status
CODE (#.02) field of MEANS TEST STATUS (#408.32) file

Value	Description
A	CATEGORY A
B	CATEGORY B
C	CATEGORY C
E	EXEMPT
I	INCOMPLETE
L	NO LONGER APPLICABLE
M	NON-EXEMPT
N	NO LONGER REQUIRED
P	PENDING ADJUDICATION
R	REQUIRED

Table VA03 - Employment Status
EMPLOYMENT STATUS (#.31115) field of PATIENT (#2) file

Value	Description
1	EMPLOYED FULL TIME
2	EMPLOYED PART TIME
3	NOT EMPLOYED
4	SELF EMPLOYED
5	RETIRED
6	ACTIVE MILITARY DUTY
9	UNKNOWN

Table VA04 - Eligibility
Internal Entry Number of MAS ELIGIBILITY CODE (#8.1) file

Value	Description
1	SERVICE CONNECTED 50% to 100%
2	AID & ATTENDANCE
3	SC LESS THAN 50%
4	NSC - VA PENSION
5	NSC
6	OTHER FEDERAL AGENCY
7	ALLIED VETERAN
8	HUMANITARIAN EMERGENCY
9	SHARING AGREEMENT
10	REIMBURSABLE INSURANCE
12	CHAMPVA
13	COLLATERAL OF VET.
14	EMPLOYEE
15	HOUSEBOUND
16	MEXICAN BORDER WAR
17	WORLD WAR I
18	PRISONER OF WAR
19	TRICARE/CHAMPUS
20	MEDICARE
21	CATASTROPHICALLY DISABLED

Table VA05 - Disability Retirement From Military
DISABILITY RET. FROM MILITARY? (#.362) field of PATIENT (#2) file

Value	Description
0	NO
1	YES, RECEIVING MILITARY RETIREMENT
2	YES, RECEIVING MILITARY RETIREMENT IN LIEU OF VA COMPENSATION
3	UNKNOWN

Table VA06 - Eligibility Status
ELIGIBILITY STATUS (#.3611) field of PATIENT (#2) file

Value	Description
P	PENDING VERIFICATION
R	PENDING RE-VERIFICATION
V	VERIFIED

Table VA07 - Race
ABBREVIATION (#2) field of RACE (#10) file

Value	Description
1	HISPANIC, WHITE
2	HISPANIC, BLACK
3	AMERICAN INDIAN OR ALASKA NATIVE
4	BLACK, NOT OF HISPANIC ORIGIN
5	ASIAN OR PACIFIC ISLANDER
6	WHITE, NOT OF HISPANIC ORIGIN
7	UNKNOWN

Table VA08 - Religion
CODE (#3) field of RELIGION (#13) file

Value	Description
0	CATHOLIC
1	JEWISH
2	EASTERN ORTHODOX
3	BAPTIST
4	METHODIST
5	LUTHERAN
6	PRESBYTERIAN
7	UNITED CHURCH OF CHRIST
8	EPISCOPALIAN
9	ADVENTIST
10	ASSEMBLY OF GOD
11	BRETHREN
12	CHRISTIAN SCIENTIST
13	CHURCH OF CHRIST
14	CHURCH OF GOD
15	DISCIPLES OF CHRIST
16	EVANGELICAL COVENANT

Table VA08 - Religion, continued
CODE (#3) field of RELIGION (#13) file

Value	Description
17	FRIENDS
18	JEHOVAH'S WITNESS
19	LATTER-DAY SAINTS
20	ISLAM
21	NAZARENE
22	OTHER
23	PENTECOSTAL
24	PROTESTANT, OTHER
25	PROTESTANT, NO PREFERENCE
26	REFORMED
27	SALVATION ARMY
28	UNITARIAN; UNIVERSALIST
29	UNKNOWN/NO PREFERENCE

Table VA09 - Relationship Number
RELATIONSHIP NUMBER (#.001) field [internal entry number] of RELATIONSHIP (#408.11) file

Value	Description
1	SELF
2	SPOUSE
3	SON
4	DAUGHTER
5	STEPSON
6	STEPDAUGHTER
7	FOSTER SON
8	FOSTER DAUGHTER
9	SON-IN-LAW
10	DAUGHTER-IN-LAW
11	BROTHER
12	SISTER
13	STEPBROTHER
14	STEPSISTER
15	BROTHER-IN-LAW
16	SISTER-IN-LAW
17	FATHER
18	MOTHER
19	STEPFATHER
20	STEPMOTHER
21	FATHER-IN-LAW
22	MOTHER-IN-LAW
23	GRANDFATHER
24	GRANDMOTHER
25	GREAT-GRANDFATHER
26	GREAT-GRANDMOTHER
27	GRANDSON
28	GRANDDAUGHTER
29	GREAT-GRANDSON
30	GREAT-GRANDDAUGHTER

Table VA09 - Relationship Number, continued

Value	Description
31	NEPHEW
32	NIECE
33	UNCLE
34	AUNT
99	OTHER

Table VA11 - Period of Service
Internal Entry Number of PERIOD OF SERVICE (#21) file

Value	Description
0	KOREAN
1	WORLD WAR I
2	WORLD WAR II
3	SPANISH AMERICAN
4	PRE-KOREAN
5	POST-KOREAN
6	OPERATION DESERT SHIELD
7	VIETNAM ERA
8	POST-VIETNAM
9	OTHER OR NONE
A	ARMY—ACTIVE DUTY
B	NAVY, MARINE—ACTIVE DUTY
C	AIR FORCE—ACTIVE DUTY
D	COAST GUARD—ACTIVE DUTY
E	RETIRED, UNIFORMED FORCES
F	MEDICAL REMEDIAL ENLIST
G	MERCHANT SEAMEN—USPHS
H	OTHER USPHS BENEFICIARIES
I	OBSERVATION/EXAMINATION
J	OFFICE OF WORKERS COMP
K	JOB CORPS/PEACE CORPS
L	RAILROAD RETIREMENT
M	BENEFICIARIES-FOREIGN GOV
N	HUMANITARIAN (NON-VET)
O	CHAMPUS RESTORE
P	OTHER REIMBURS. (NON-VET)
Q	OTHER FEDERAL – DEPENDENT
R	DONORS (NON-VET)
S	SPECIAL STUDIES (NON-VET)
T	OTHER NON-VETERANS
U	CHAMPVA—SPOUSE, CHILD
V	CHAMPUS
W	CZECHOSLOVAKIA/POLAND SVC
X	PERSIAN GULF WAR
Y	CAV/NPS
Z	MERCHANT MARINE

Table VA13 - Rated Disabilities
NUMBER (.001) Field [internal entry number] of the DISABILITY CONDITION (#31) File
(Sample listing of possible values)

Value	Description
1	OSTEOMYELITIS
2	BONE DISEASE
3	RHEUMATOID ARTHRITIS
4	DEGENERATIVE ARTHRITIS
5	ARTHRITIS

Table VA14 - Medication Copayment Exemption Status

Value	Description
0	NON-EXEMPT
1	EXEMPT

Table VA15 - Enrollment Status
(#.04) field of the PATIENT ENROLLMENT (#27.11) file

Value	Description
1	Unverified
2	Verified
3	Inactive
4	Rejected
5	Suspended
6	Deceased
7	Canceled/Declined
8	Expired
9	Pending
10	Not Eligible

Table VA16 - Reason Enrollment Canceled/Declined
(#.05) field of the PATIENT ENROLLMENT (#27.11) file

Value	Description
1	Dissatisfied with Care
2	Geographic Access
3	Other Insurance
4	Other

Table VA17 - Enrollment Priority
(#.07) field of the PATIENT ENROLLMENT (#27.11) file

Value	Description
1	Priority 1
2	Priority 2
3	Priority 3
4	Priority 4
5	Priority 5
6	Priority 6
7	Priority 7

Table VA0115 - Servicing Facility
(Sample listing of possible values)

Value	Description
512 9AC	Perry Point (Nursing Home)

Table VA0033 – Fee Basis Treatment Code Type

Value
Short Term Fee Status
Home Nursing Services
For I.D. Card Status
State Home

Table VA0034 – Fee Basis Program

Value
CHAMPVA
Civil Hospital
Comp & Pension
Contract Halfway House
Contract Nursing Home
Contract Readjustment Counseling
Dental
Dialysis
Home Health Services
Inpatient
Other Institutional Services
Outpatient
Oxygen Services
Pharmacy
State Home

Table VA0035 – Enrollment Sub-Group
Enrollment Sub-Group (.12) of Patient Enrollment file (#27.11

Value	Description
a	Non-compensable zero percent service connected veterans
b	All other priority 7 veterans