

Consult - Activity Measures

Friday, December 17, 2021 11:48 AM



Overview

Purpose	The purpose of the Consult - Activity Measures report is to support the Electronic Technical Manual (eTM) consult measures. Though all consult request classifications are available on the report, only those specified in the data definitions are loaded into the Performance Measures report.
What's New	n/a
Model Data Dictionary	
Primary Data Sources	<ul style="list-style-type: none"> • VSSC Consult Cube • CDWWork.Con.ConsultActivity
Update Frequency	This report is updated daily
VSSC Website Location	https://vssc.med.va.gov/VSSCMainApp/products.aspx?PgmArea=45&sub_ID=155
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplD=4912
Power BI Data hub	
Power BI End Point	Data Source=powerbi://api.powerbigov.us/v1.0/myorg/VSSC_Access?readonly;Initial Catalog=Consult - Activity Measures;

Measure Definitions

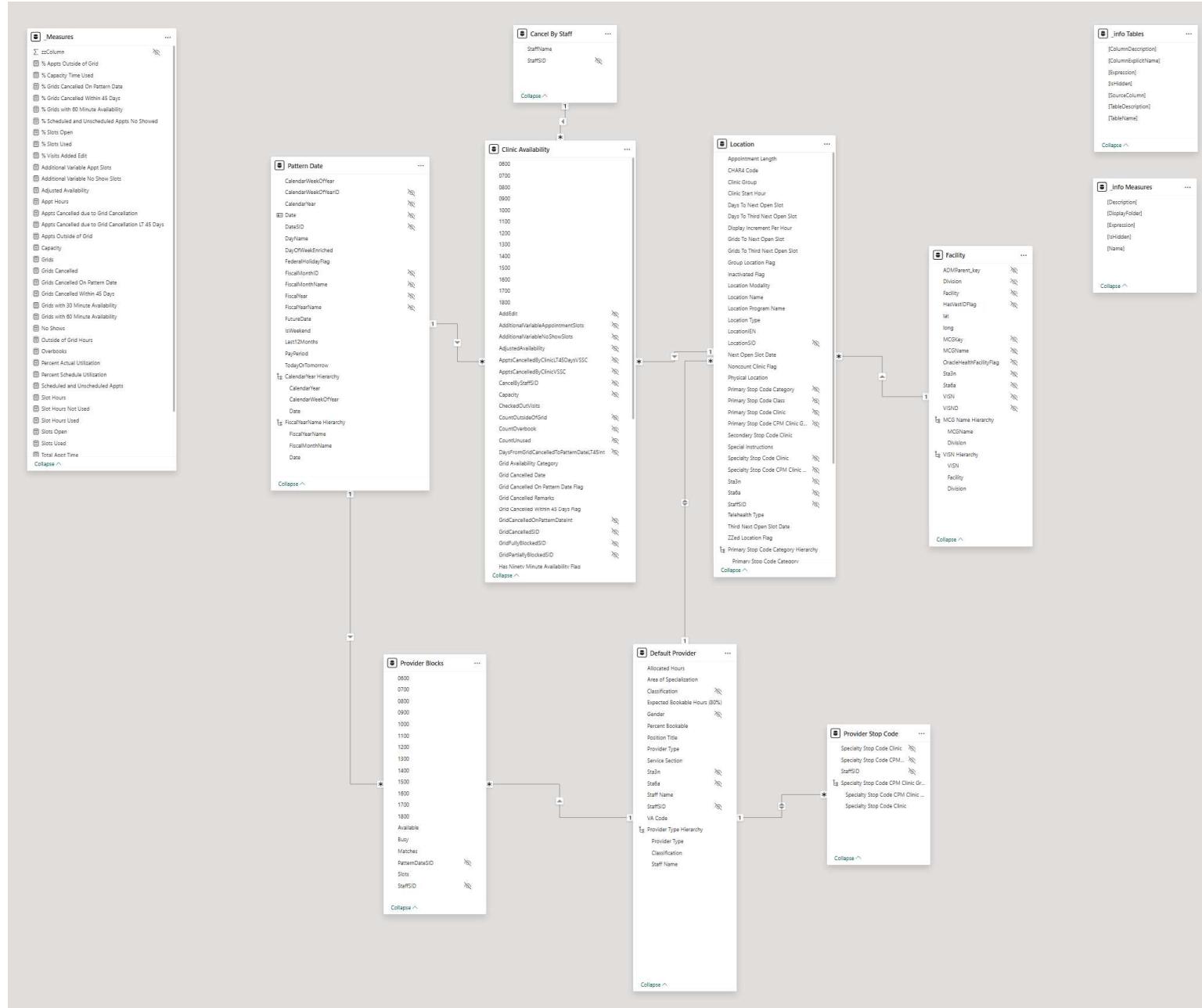
Measure	Link to Electronic Technical Manual Definition
con9	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3588&Year=2025&rs:Command=Render
con21	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3660&Year=2025&rs:Command=Render
con22	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3661&Year=2025&rs:Command=Render
con23	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3784&Year=2025&rs:Command=Render
cccon4	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3657&Year=2025&rs:Command=Render
cccon6	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3659&Year=2025&rs:Command=Render
cccon8	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3783&Year=2025&rs:Command=Render
cccon9	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3781&Year=2025&rs:Command=Render
ns-ns21	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=4068&Year=2025&rs:Command=Render
ns-ns22	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=4069&Year=2025&rs:Command=Render
ns-ns23	http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=4070&Year=2025&rs:Command=Render

Report Page Catalog

Report Page	Description
At a Glance	<p>The purpose of this Clinic Utilization Report/Model is to display data associated with a location's scheduling grid in VistaA. The primary goal of this report is to mimic the Clinic Utilization Statistical Summary (CUSS) report in VistaA.</p> <p>Please note:</p> <p>The true capacity of a clinic (e.g. starting state of the grid) is not available in the CDW. Daily capacity is derived from the most future grid of the same day of the week with the same pattern structure. This mostly affects clinics that allow for multiple appointments in the same time slot (group clinics, clinics with multiple providers). Please consult the CUSS report in VistaA before making critical decisions.</p> <p>Telehealth or "ghost" clinics with a starting capacity of 0 (grid with one or more [0]) may not be reflected accurately.</p> <p>The starting state of the grid is not available in the CDW.</p>
Vista CUSS	n/a
Utilization	Clinic Utilization - Report - Power BI
Availability by Modality	<ul style="list-style-type: none"> • BISL_Collab,DOEx.vw_ClinicAvailability on vhacدوا01 • Appt.Appointment
Scheduling Grid	This report is updated daily
Scheduling Grid - Provider Overlay	VSSC - VHA Support Service Center
Open Slot Time By Week	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplD=4527

Cancelled Grids - At a Glance						
Cancelled Grids - Summary		Name	Type	Owner	Refreshed	Location
Cancelled Grids - Details		Data Source=powerbi://api.powerbigov.us/v1.0/myorg/VSSC_Access?readonly;Initial Catalog=Clinic Utilization - model;				
Third Next Available (TNA)						
Avg Appt Length/Location Details						

Model ERD



Additional Information

Consult - DST Usage (Pre-CTB)

Tuesday, March 22, 2022 1:36 PM



What's New

Purpose

Decision Support Tool (DST) data is currently parsed from the data inserted by the DST in the comment of a consult. If the DST inserts data more than once the last instance is used for the entire consult. The DST Usage report contains data related to DST for consults entered on or after 6/6/2019.

Multiple Eligibility and Best Medical Interest (BMI) flags can be captured for a single consult.

An Unknown Clinical Service or Veteran Option means we're unable to parse the data from the comment string.

For a complete definition of eligibility and best medical interested, please refer to the DST application documentation.

PHI Access

The level of access you need is granted either locally by your CUPS/NSSD point of contact (POC) or by National Data Systems (NDS).

- You will find a complete set of instructions and forms for submitting a request for the access you need at the following link:
<http://vaww.vhadataportal.med.va.gov/Support/FAQs.aspx#DataAccessVSSC>
- This report will tell you who your local NSSD contacts are, complete with phone number and email address:
https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fApps%2fNSSD%2fProd%2fNSSD_POCs&rs:Command=Render
- Also, you can check your access at any time with the following report:
<https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fNSSDReports%2fCprsNssdUserCredsProd&rs:Command=Render>

Dimension/Slicer Definitions

Dimension	Definition
Usage by Facility	displays DST usage by the facility who received the consult
Usage by Stop Code	displays DST usage by the stop code associated with the receiving consult request service
Clinical Service	displays DST usage by the clinical service embedded by the DST in the consult activity comment

Measure Definitions

Measure	Definition
DST Required Consult Entered	An estimate of the number of consults entered that should have launched the DST
DST Consult	Evidence of a DST footprint (DST ID, or -DST) is found in either the consult reason or consult activity comment
DST Footprint in Reason	The DST footprint DST ID was found in the consult reason
Eligibility Documented	At least one of the following eligibilities were selected in the DST application: Drive Time Grandfathered Hardship No Appts Available No Full Service
Eligibility - Drive Time	The Drive Time eligibility was flagged in the DST application
Eligibility - Grandfathered	The Grand-fathered eligibility was flagged in the DST application
Eligibility - Hardship	The Hardship eligibility was flagged in the DST application
Eligibility - No Appts Available	The no appointments are available eligibility was flagged in the DST application
Eligibility - No Full Service	The no full service VA eligibility was flagged in the DST application
BMI Documented	A best medical interest (BMI) was selected in the DST application
BMI - Attendant	The Attendant best medical interest (BMI) was selected in the DST application
BMI - Continuity	The Continuity best medical interest (BMI) was selected in the DST application
BMI - Frequency	The Frequency best medical interest (BMI) was selected in the DST application
BMI - Nature	The Nature best medical interest (BMI) was selected in the DST application
BMI - Other	The Other best medical interest (BMI) was selected in the DST application
BMI - Quality	The Quality best medical interest (BMI) was selected in the DST application
BMI - Timeliness	The Timeliness best medical interest (BMI) was selected in the DST application
Changed From Opt-in to Opt-out	There is evidence the DST was used twice and the first veteran option was opt-in and the second veteran option was opt-out
Non DST Users	Ordering providers who have not used the DST application

Additional Information

Primary Data Sources	<ul style="list-style-type: none"> • VSSC Consult Cube • Con.ConsultActivity
Update Frequency	Daily
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplID=5177
Link to VSSC Website Location	Consult - DST - Report - Power BI (powerbigov.us)
Power BI Server:	Data Source=powerbi://api.powerbigov.us/v1.0/myorg/VSSC_Access;Initial Catalog=Consult - DST - Model;

Consult - DST Usage (CTB)

Tuesday, March 22, 2022 1:36 PM



What's New

Purpose

This report displays consult toolbox information based on consults where these consult factors have been added: CCE, VCC, BVP, CSC, CSN, CST, SEV, NAA, SEO, CAT. It shows various consult information such Facility, File Entry Date, Consult SID, Patient Name and SSN.

Multiple Eligibility and Best Medical Interest (BMI) flags can be captured for a single consult.

For a complete definition of eligibility and best medical interested, please refer to the DST application documentation.

PHI Access

The level of access you need is granted either locally by your CUPS/NSSD point of contact (POC) or by National Data Systems (NDS).

- You will find a complete set of instructions and forms for submitting a request for the access you need at the following link:
<http://vaww.vhadataportal.med.va.gov/Support/FAQs.aspx#DataAccessVSSC>
- This report will tell you who your local NSSD contacts are, complete with phone number and email address:
https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fApps%2fNSSD%2fProd%2fNSSD_POCs&rs:Command=Render
- Also, you can check your access at any time with the following report:
<https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fNSSDReports%2fCprsNssdUserCredsProd&rs:Command=Render>

Additional Information

Primary Data Sources	<ul style="list-style-type: none">• VSSC Consult Cube• Con.ConsultActivity
Update Frequency	Daily
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplID=5177
Link to VSSC Website Location	Consult - DST - Report - Power BI (powerbigov.us)
Power BI Server:	Data Source=powerbi://api.powerbigov.us/v1.0/myorg/VSSC_Access;Initial Catalog=Consult - DST - Model;

Consult - Trend

Tuesday, March 22, 2022 1:36 PM



What's New

1/1/2024: Due to an issue with the database table we're unable to update this report at the present time. Unfortunately we do not have a timeline for resolution.

[RCI Q&A Database - Power Apps](#)

Purpose

The intent of the VSSC Consult Cube is to provide information related to VA and non-VA consults available in VistA. This cube includes consults entered in VISTA after 10/01/2011 or from FY12 forward. Open consults can represent unfulfilled and pending patient care needs. Patient safety can be compromised if they are indiscriminately closed. For this reason, do not close consults until they are properly reviewed.

The Consult – Open Trend report then builds on the cube data to isolate how the open consult data looked at the time of the snapshot. Thus if the snapshot is created at 1/15/2022 then the totals match the cube at that time. Within a few days, the cube data will continue to shift, but the snapshot would show the data as it was. This means that one cannot look at the underlying consults in question for the snapshots, as we do not have the storage space to keep that data.

Note that Test Patients are excluded from the consult cube.

***NOTE: Due to a table inconsistency with the Appt.Appointment CDW table, the 12/16/2022 snapshot is not correct for the link to past appt measure. Subsequent snapshots are correct.**

Dimensions

Dimensions	Description
CPRS Status	The CPRS Status is the status of the consult
File Entry Date	Date the consult was entered in VISTA
Snap Shot Date	The date the snap shot for data was taken
Future Care	The consult currently considered "future care". Yes: the PID is greater than 90 days from today. No: the PID is within 90 days or in the past.
Facility	The location of the consult service responsible for the consult (receiving/filling/responsible facility).
Receiving Service - Stop Code	The stop code assigned to the consult request service for reporting services. A consult request service can be associated with 0 or many stop codes. The stop code VSSC uses for reporting purposes is the first stop code associated with the request service (aka IEN 1). If the first stop code associated with the request service is generic (669, 185, 186, 187, 188) the second stop code is used. Using this allows the station to control which stop code is used in reporting.
Receiving Service - Classification	The classification of the consult (Outpatient, inpatient, administrative, community care, etc.). Consult services are divided into Primary Request Types based on the naming conventions of the service name and flags assigned to the request service in VISTA.
Request Service	Characteristics (stop code, classification) of the consult request service that was ordered.
Urgency	Urgency of the consult. Existing VISTA consult urgency statuses have been placed in a hierarchy of Routine or Stat.

Request Service Classification

Primary Request Type		
Administrative	Administrative consults	Administrative AdminCP DODMTF DODNonMTF ReturnToClinic TransferCOVID TravelingVeteran VCCPE
ClinicalConsult	Traditional in-house VA clinical care	Inpatient Interfacility Outpatient FutureCare_legacy MissingType MultipleTypes
ClinicalProcedure		ClinicalProcedure FutureCare_CP_legacy
CommunityCare	Replaces the former NON VA CARE Primary Request Type as of 10/28/2015.	Choice DOD Emergency NVC NVCC NVCCGEC OneConsult OneConsultGEC
Prosthetics	Request for prosthetic services	Prosthetics
Unknown	indicates the service cannot be classified. We have found several reasons for this to include a "Null" consult service naming convention for a request service previously named in the cube data	Unknown

Additionally note that VA Clinical Care is a category that contains the Primary Request Types of Clinical Consult and Clinical Procedure. VA Care is everything but Community Care (Administrative, Prosthetics, Clinical Consult, Clinical Procedure).

The Classification logic is as follows:

Classification	
Administrative	The Administrative Flag is set to "yes" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care.
CHOICE	The receiving service title contains "CHOICE"
Clinical Procedure	When the consult receiving service title contains the prefix "CP". It should not be used in combination with other naming conventions or flags with the exception of the legacy future care CP
DOD	Facilities have provided names of consult services which are Department of Defense consults. A standardized naming convention will be established at some point in the future.
DOD MTF	The consult title contains "DOD MTF"
DOD Non MTF	The consult title contains "DOD Non MTF"
Emergency	Consult title contains "COMMUNITY CARE-EMER"
FutureCare_legacy	The consult receiving service title contains the words "Future Care" or the abbreviation "FC" It should not be used in combination with other naming conventions or flags with the exception of Clinical Procedure
Future Care_CP_legacy	The consult receiving service title contains the words "Future Care" or the abbreviation "FC" along with the clinical procedure naming convention of "CP" These should not be used in combination with other naming conventions or flags other than those described
Inpatient	The consult receiving service title contains the word "Inpatient" or the abbreviation "Inpt" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care
Inter-Facility	The consult receiving service title contains the words "Inter-facility" or "Inter Facility" or the abbreviation "IFC" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care
Missing Type	The receiving service does not contain a naming convention or flag, or if the request type cannot be determined.

Multiple Types	<p>The receiving service is identified as having more than one request type</p> <p>In most cases, the Receiving Service should have one Request Type. There are exceptions at this time. Multiple Types are allowed for Non VA Care because the National Program Office requires both a specific naming convention and an administrative flag. Multiple Types are also allowed for Future Care Clinical Procedures because the "CP" prefix must be used for Clinical Procedures. Future Care Clinical Procedures should contain both the naming convention for Clinical Procedures and the naming convention for Future Care. Prosthetics may contain more than one naming conventions/flag as well.</p>
NVCC	The receiving service title contains with "NON VA CARE" and the administrative flag is set to "yes"
NVCGEC	The receiving service title contains with "NON VA CARE GEC" and the administrative flag is set to "yes"
NVC	We have attempted to identify any old Fee/Purchased Care consult services which do not meet the current business rule naming conventions and include words like Fee, Contract, Purchased, NonVACare or FB.
OneConsult	The consult request service name starts with "COMMUNITY CARE"
OneConsultGEC	The consult request service name starts with "COMMUNITY CARE-GEC"
Outpatient	<p>The consult receiving service title contains the word "Outpatient". "Outpatient" or the abbreviation "Outpt"</p> <p>It should not be used in combination with other naming conventions or flags with the exception of Non VA Care</p>
Prosthetics	<p>The ProstheticsServiceFlag = "Y" or the consult service name begins with "Prosthetics" or contains the word "Prosthetics" and does not begin with NON VA CARE or the consult service name begins with "Eyeglass Request", "Contact Lens Request, "Home Oxygen Request or "PCC Equipment Request"</p> <p>Note that the Prosthetics flag is set by a VISTA interface. If this flag is "Y" then the service is identified as Prosthetics regardless of any other naming convention or flag used for the service.</p>
Return to Clinic	<p>The request service is for a return to clinic appointment</p> <p>The consult title name contains "RTC"</p>
TransferCOVID	Consult tile contains "TRANSFER COVID"
Traveling Veteran	<p>The request service is associated with the traveling veteran coordinator service</p> <p>The consult title name contains "traveling veteran"</p>

Measures

Name	
Consults	The number of consults in the cube
Active GT 30 Days	Consults that have been in active status greater than 30 days
Consult GT 90 Days	Consults that have been in active status greater than 90 days
Open Consults	The number of consults with a "not completed" CPRS Status (Active, Partial Results, Pending, Renewed, Scheduled, Unreleased, and Not Recorded)
Open GT0 Days from Earliest Date	The number of consults currently open where today is greater than the Earliest Date (PID)
Open GT14 Days from File Entry Date	The number of consults currently open greater than 14 days from the File Entry Date
Open GT14 Days from Patient Identified Date (PID)	The number of consults currently open greater than 14 days from the Earliest Date (PID)
Open GT30 Days from File Entry Date	The number of consults currently open greater than 30 days from the File Entry Date
Open GT30 Days from Patient Identified Date (PID)	The number of consults currently open greater than 30 days from the Earliest Date (PID)
Open GT60 Days from File Entry Date	The number of consults currently open greater than 60 days from the File Entry Date
Open GT60 Days from Patient Identified Date (PID)	The number of consults currently open greater than 60 days from the Earliest Date (PID)
Open GT90 Days from Patient Identified Date (PID)	The number of consults currently open greater than 90 days from the Earliest Date (PID)
Open GT90 Days from File Entry Date	The number of consults currently open greater than 90 days from the File Entry Date
Open GT180 Days from Patient Identified Date (PID)	The number of consults currently open greater than 180 days from the Earliest Date (PID)
Open GT180 Days from File Entry Date	The number of consults currently open greater than 180 days from the File Entry Date
Open GT365 Days from Patient Identified Date (PID)	The number of consults currently open greater than 365 days from the Earliest Date (PID)
Open GT365 Days from File Entry Date	The number of consults currently open greater than 365 days from the File Entry Date
Partial Results GT 10 Days	The number of consults in a Partial Results CPRS Status where more than 10 days has elapsed since the appointment date
Pending GT 2 Business Days	The number of consults in a Pending CPRS Status where more than 2 days has elapsed since the last pending, typically the file entry date or the forwarded date. This measure only excludes weekends.

	Holidays are included.
Pending GT 7 Days	The number of consults in a Pending CPRS Status where more than 7 days has elapsed since the file entry or patient indicated date (future care, community care)
Scheduled Linked to Past Appt	The number of consults in a scheduled status where the last appointment date has passed. *NOTE: Due to a table inconsistency with the Appt.Appointment CDW table, the 12/16/2022 snapshot is not correct for this measure. Subsequent snapshots are correct.
Scheduled Not Linked to Appt	The number of consults scheduled without a linked appointment
Unscheduled No Activity GT 14 Days	Consult is in active or pending status and there has been no activity in the past 14 days and today is within 30 days of the PID
Unscheduled No Activity GT 30 Days	Consult is in active or pending status and there has been no activity in the past 30 days and today is within 30 days of the PID
Unscheduled Consults	The number of consults in an unscheduled status (active/pending)

Additional Information

Primary Data Sources	<ul style="list-style-type: none"> • Appt.Appointment • Con.Consult • Con.ConsultActivity • Dim.AppointmentType • Dim.AssociatedStopCode • Dim.Institution • Dim.Location • Dim.RequestService • Dim.StopCode • Outpat.Visit • SPatient.SPatient • SPatient.SConsultActivityComment • SPatient.SConsultReason
Update Frequency	Daily
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplID=5222
Link to Product	https://app.powerbigov.us/groups/me/apps/057a6693-7190-4fd4-9491-f8a038913689/reports/ef5a034d-cc0d-4538-98cc-fafbfd41a1c/ReportSection

Consult – Patient Details

Friday, December 17, 2021 11:43 AM

Please see the [Consult Cube Dashboard](#) ([Web view](#)) data definitions.

Consult - Request Service Classification

Tuesday, March 22, 2022 1:37 PM



What's New

Purpose

This report displays consult request services and their assigned primary request type, classification, and stop code.

This information can be edited and modified through the consult title/request service configuration within Vista.

Columns

Division	The division associated with the consult.
Service Name	The consult request service name. This is the name of the consult.
Notify Staff	The staff name identified within the consult title/request service configuration within Vista.
Primary Request Type	Consult services are divided into Primary Request Types based on the naming conventions or flags assigned to the consult service in VISTA. Each Primary Request Type contains one or more classifications. See Primary Request Type table below for logic.
Classification	The classification based on business rules. See Classification Type table below for logic.
Stop Code for Reporting	The stop code assigned to the consult request service. A consult request service can be associated with 0 or many stop codes. The stop code VSSC uses in reports is the associated stop code with IEN 1, or IEN 2, if IEN 1 is 669. Using the first IEN allows the station to control which stop code is assigned in VSSC reports.
Stop Code Name for Reporting	The stop code name assigned to the consult request service.
Associated with Stop 669 (CC)	States if the consult is associated with stop code 669 (identifying as Community Care) 0 = No 1 = Yes
• Administrative • Return To Clinic • Traveling Veteran • Outpatient • Inpatient • Clinical Procedure • Interfacility • NVC • NVCC • NVCCGEC • Choice • One Consult • One Consult GEC • Prosthetics • Multiple Types • Missing Types	The Classification types of the consult. See Classification Type table below for logic. 0 = No 1 = Yes
Service Usage	

Primary Request Type

Primary Request Type	Description	Classifications
Administrative	Administrative consults	Administrative AdminCP DODMTF

		DODNonMTF ReturnToClinic TransferCOVID TravelingVeteran VCCPE
ClinicalConsult	Traditional in-house VA clinical care	Inpatient Interfacility Outpatient FutureCare_legacy MissingType MultipleTypes
ClinicalProcedure		ClinicalProcedure FutureCare_CP_legacy
CommunityCare	Replaces the former NON VA CARE Primary Request Type as of 10/28/2015.	Choice DOD Emergency NVC NVCC NVCCGEC OneConsult OneConsultGEC
Prosthetics	Request for prosthetic services	Prosthetics
Unknown	Indicates the service cannot be classified. We have found several reasons for this to include a "Null" consult service naming convention for a request service previously named in the cube data	Unknown

Classification Type

Classification	Naming Conventions and Logic
Administrative	The Administrative Flag is set to "yes" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care.
CHOICE	The receiving service title contains "CHOICE"
Clinical Procedure	When the consult receiving service title contains the prefix "CP". It should not be used in combination with other naming conventions or flags with the exception of the legacy future care CP
DOD	Facilities have provided names of consult services which are Department of Defense consults. A standardized naming convention will be established at some point in the future.
DOD MTF	The consult title contains "DOD MTF"
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Emergency	Consult title contains "COMMUNITY CARE-EMER"
FutureCare_legacy	The consult receiving service title contains the words "Future Care" or the abbreviation "FC" It should not be used in combination with other naming conventions or flags with the exception of Clinical Procedure
Future Care_CP_legacy	The consult receiving service title contains the words "Future Care" or the abbreviation "FC" along with the clinical procedure naming convention of "CP" These should not be used in combination with other naming conventions or flags other than those described
Inpatient	The consult receiving service title contains the word "Inpatient" or the abbreviation "Inpt" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care
Inter-Facility	The consult receiving service title contains the words "Inter-facility" or "Inter Facility" or the abbreviation "IFC" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care
Missing Type	The receiving service does not contain a naming convention or flag, or if the request type cannot be determined.
Multiple Types	The receiving service is identified as having more than one request type In most cases, the Receiving Service should have one Request Type. There are exceptions at this time. Multiple Types are allowed for Non VA Care because the National Program Office requires both a specific naming convention and an administrative flag. Multiple Types are also allowed for Future Care Clinical Procedures because the "CP" prefix must be used for Clinical Procedures. Future Care Clinical Procedures should contain both the naming convention for Clinical Procedures and the naming convention for Future Care. Prosthetics may contain more than one naming conventions/flag as well.
NVCC	The receiving service title contains with "NON VA CARE" and the administrative flag is set to "yes"
NVCCGEC	The receiving service title contains with "NON VA CARE GEC" and the administrative flag is set to "yes"
NVC	We have attempted to identify any old Fee/Purchased Care consult services which do not meet the current business rule naming conventions and include words like Fee, Contract, Purchased, NonVACare or FB.

OneConsult	The consult request service name starts with "COMMUNITY CARE"
OneConsultGEC	The consult request service name starts with "COMMUNITY CARE-GEC"
Outpatient	The consult receiving service title contains the word "Outpatient". "Outpatient" or the abbreviation "Outpt" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care
Prosthetics	The ProstheticsServiceFlag = "Y" or the consult service name begins with "Prosthetics" or contains the word "Prosthetics" and does not begin with NON VA CARE or the consult service name is "Eyeglass Request", "Contact Lens Request, "Home Oxygen Request or "PCC Equipment Request" Note that the Prosthetics flag is set by a VISTA interface. If this flag is "Y" then the service is identified as Prosthetics regardless of any other naming convention or flag used for the service.
Return to Clinic	The request service is for a return to clinic appointment The consult title name contains "RTC"
TransferCOVID	Consult tile contains "TRANSFER COVID"
Traveling Veteran	The request service is associated with the traveling veteran coordinator service The consult title name contains "traveling veteran"

Additional Information

Primary Data Sources	<ul style="list-style-type: none"> • Con.Consult • Dim.AssociatedStopCode • Dim.Institution • Dim.Location • Dim.RequestService • Dim.StopCode • VSSC Tables are used to populate OEFOIF, Stop Code Category, and Clinic Groups
Update Frequency	Daily The Consult Cube is updated daily, in the morning, post CDW processing. Due to reliance on the CDW data distribution process the update time will vary. Once updated, the data is current through midnight.
SSAS Server	VHACDWDWHMDM08
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplID=4796
Link to Product	Consult - Request Service Classification - Report Viewer (va.gov)
Need Access?	FAQ

Consult - Referral Coordination Initiative Dashboard

Friday, December 17, 2021 11:42 AM



What's New

Purpose

This dashboard is an extension of the Consult Cube built specifically for the Referral Coordination Initiative (RCI).

Please see the Consult Cube Dashboard data definitions for additional information:

[Consult Cube Dashboard](#)

Please Note: This report only contains data from VistA and is not applicable for stations that have transitioned to Oracle Health.

RCI Dashboard Dimensions

Dimensions	Description
RCT Expected	<p>Yes/No.</p> <p>Documentation of "RCT" is expected on the consult.</p> <p>A consult will be documented as Yes if the current request service is associated with a stop code on the IVC inclusion list or it was forwarded from a consult request service that is associated with a stop code on the IVC inclusion list.</p> <p>Stop code inclusion list:</p> <p>143,149,158 , 201,202,203,204,205,206 , 302,303,304,305,306,307,308,309,310,311,312,313,314,315,316,318,321,337,349 , 401,402,403,405,406,407,408,409,410,411,413,414,415,420,436,486,487,488,489 , 502,513,516,534,539,550,560,562,576,577</p> <p>The request service must also be a "ClinicalConsult".</p> <p>Inpatient and Econsult classifications are not included.</p> <p>Telederm, teleretinal, and tele-eye are not included (based on request service naming conventions).</p> <p>Request services associated with a store and forward stop code are not included.</p> <p>Store and forward stop codes: 189,646,647,694,695,696</p>
Has RCT	<p>Yes/No</p> <p>The Consult has at least one activity performed by the RCT - Referral Coordination Team role in the Consult Toolbox or the #RCT# comment (for older consults).</p>

RCI Dashboard Measures

Name	Description
% Consults with Sched Pref Fully Documented	The percent of consults with scheduling preferences fully documented via the Consult Toolbox.
% Consults with Sched Pref Fully Documented As expected	The percent of consults with scheduling preferences fully documented via the Consult Toolbox at file entry or on or before forwarding to community care.

CC Eligibility	A best guess at the community care eligibility of the patient. This is based on DST, consult toolbox usage, and the consult reason.
CC Opted Out	The number of consults where an opt out is documented, either via, DST, consult toolbox, or the VA appointment comment.
Has Eligibility Documented	The number of consults with a community care eligibility documented. This is based on DST, consult toolbox usage, and the consult reason.
Opt out documented	The number of consults where an opt out is documented
Opt out expected	The number of consults where an opt out is expected to be documented. This is based on consults that fit mission criteria based on the file entry date, PID, and linked appointment date time.
% opt out documented	The percent of consults where an opt out is expected to be documented and it is documented
RCT Expected	<p>The Consult is expected to have RCT documented via the Consult Toolbox. This is based on the primary request type and the stop codes associated with the consult request service. Request services associated with the stop codes below are expected to have RCT documentation. If a consult is forwarded from a request service where RCT was expected than it will be flagged as RCT Expected even if the current request service doesn't expect it.</p> <p>143,149,158 , 201,202,203,204,205,206 , 302,303,304,305,306,307,308,309,310,311,312,313,314,315,316,318,321,337,349 , 401,402,403,405,406,407,408,409,410,411,413,414,415,420,436,486,487,488,489 , 502,513,516,534,539,550,560,562,576,577</p>
% Has RCT	The percent of consults with RCT documented via the Consult Toolbox (CTB) or #RCT# (pre CTB method).

the Office of Community Care Field Guidebook, the following consult factors are required in order for the community care consult to be considered "fully documented" with the Veteran's Community Care scheduling preferences (when consult is both forwarded to Community Care and when consult is sent directly to Community Care):

Scheduling Responsibility/Required Preferences – CTB2.0 Consult Factors Required

VA Scheduling Community Care Consult

- Preferred Provider (or no preferred provider) PPP: Veteran Expressed Preference
- Day of Week DT1: Veteran First Day Preference
- Time of Day TI1: Veteran First Time Preference

Veteran Self-Scheduling Community Care Consult

- Veteran Self Scheduling VSP: Veteran Scheduling Preference (and includes text "Veteran Self-Schedules")
- Preferred Provider (or no preferred provider) PPP: Veteran Expressed Preference

Additional Information

Primary Data Sources	<ul style="list-style-type: none"> • Appt.Appointment • Con.Consult • Con.ConsultActivity • Dim.AppointmentType • Dim.AssociatedStopCode • Dim.Institution • Dim.Location • Dim.RequestService • Dim.StopCode • Outpat.Visit • SPatient.SPatient • SPatient.SConsultActivityComment • SPatient.SConsultReason
Update Frequency	Daily
SSAS Server	Vhacdwdwhtdm07.vha.med.va.gov/VSSC_Consult_Tabular
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramID=4377
Link to Product	Consult - RCI Portal - Report Viewer (va.gov)

Consult Cube Dashboard

Friday, December 17, 2021 11:42 AM



What's New

5/16/2024: Removed FY16 to improve processing and query performance

Purpose

This data definition also contains definitions for all consult related reports, including the VSSC Consult Cube, Econsult Report, Decision Support Tool (DST) Usage, Request Service Classifications, and Consult - Echo Scheduling Effort reports.

The intent of the VSSC Consult Cube is to provide information related to VA and non-VA consults available in VistA. This cube includes consults entered in VISTA after 10/01/2011 or from FY12 forward. Open consults can represent unfilled and pending patient care needs. Patient safety can be compromised if they are indiscriminately closed. For this reason, do not close consults until the properly reviewed.

Note that Test Patients are excluded from the consult cube.

[RCI Q&A Database - Power Apps](#)

Dimensions

Dimensions	Description
Appointment Status	The status of the appointment currently linked to the consult.
Billable Insurance	Billable Insurance Indicator "Yes" or "No", based on data in CDW Raw
Closure Date	Last Activity Date Time where Activity is Complete/Update, Discontinued, Discontinued/Edit or Cancelled.
Community Care Eligibility	The community care eligibility of the consult. This is based on business rules provided by the Office of Community Care and looks at data generated by the Decision Support Tool (DST), the Consult Toolbox, and the Consult Reason. Due to front end processes this field is a based guess and may not accurately represent the intention. The general order of precedence is: <ol style="list-style-type: none">1. DST2. Consult Toolbox (COI)3. Consult Reason4. Consult Toolbox (SEV) *this is a best guess
CPRS Status	The CPRS Status is the status of the consult There are 3 calculated members in this hierarchy: <ol style="list-style-type: none">1. Closed Consults - consists of consults with CPRS Status of Cancelled, Complete, Discontinued, and Discontinued/Edit2. Open Consults - consists of consults with CPRS Status of Active, Partial Results, Pending, Renewed, Scheduled, Unreleased, and Not Recorded.3. Unscheduled/Non-scheduled (active + pending)
Days To Complete	Groups consults into day ranges for completion of consult. Completion includes complete, cancelled, and discontinued.
Elapsed Days From Earliest Date	The elapsed days from earliest date (clinically indicated date, patient indicated date, PID) to the closed date or the current date, by group.
Elapsed Days From File Entry Date	The elapsed days from file entry date to the closed date or the current date, by group.
Elapsed Days From Last Activity Date	The elapsed days from the last activity date of the consult to the closed date or the current date, by group.
File Entry - Hour Of Day	The hour of day the consult was entered into VistA
File Entry Date	Date the consult was entered in VISTA
First Forwarded From Date	The date the consult had the first FORWARD FROM action performed.
First Scheduled Date	The date the consult first hit SCHEDULED status.
Forwarded From Different Primary Request Type	
Future Care	The consult currently considered "future care".

	Yes: the PID is greater than 90 days from today. No: the PID is within 90 days or in the past.
Patient Sex	Patient Sex
HEC Date of Death	<p>Yes indicates there is an official date of death on record with the Health Eligibility Center (HEC)</p> <p>The HEC data is considered the official resource for death reports.</p> <p>WARNING: This should be validated before taking action on an open consult based on this information.</p> <p>When a patient appears to be a potentially deceased patient you should check with your business office to verify that the patient is in fact deceased. In the event that a date of death discrepancy (e.g. Veteran is verified as living) is discovered, have your business office report the erroneous date of death via the Health Eligibility Center Alert website at <https://vhahecweb2.vha.med.va.gov/hecalert>.</p> <p>Once the HEC updates the data table provided to the VSSC, the HEC Date of Death will be updated. This delay could take as long as eight weeks so it is recommended that you track those patients somehow to ensure this information is updated.</p>
Interfacility	The consult is an interfacility consult.
Last Action Taken	<p>Last action recorded for the consult</p> <p>A closed consult may have a last action that is not the closure activity.</p>
Linked Appointment Date	The date the appointment linked to the consult is scheduled to occur.
Linked Appointment Made Date	The date the appointment linked to the consult was made.
Location - Appointment	The location of the linked appointment.
Location - Receiving Facility	The location of the consult service responsible for the consult (receiving/filling/responsible facility).
Location - Sending	The location of the patient when the consult was ordered.
Location - Sending Facility	The facility of the patient when the consult was ordered from.
OEFOIF	Identifies whether the patient is designated by the Health Eligibility Center (HEC), or the Defense Management Data Center (DMDC), or both, as an OEF/OIF veteran. Also see the Official Definition of which Veterans are included in the OEF/OIF roster.
Ordered As Future Care	<p>Yes: the PID is greater than 90 days from the file entry date.</p> <p>No: the PID is less than 90 days from the file entry date.</p>
Ordering Provider	The staff who ordered the Consult.
Patient County	The State and County of the Patient. Also contains the VISN, Sector, and the County in a separate hierarchy.
Patient PCMM Team	The Patient's current PCMM Team.
Place Of Consultation	Where the consult was ordered.
Provisional Diagnosis	<p>This is the Provisional Diagnosis the ordering clinician would specify on the Consult Form 513.</p> <p>This field is used to store the coded portion of the Provisional Diagnosis if a coded diagnosis is sent via CPRS.</p>
Receiving Service - Stop Code	<p>The stop code assigned to the consult request service for reporting services.</p> <p>A consult request service can be associated with 0 or many stop codes. The stop code VSSC uses for reporting purposes is the first stop code associated with the request service (aka IEN 1). If the first stop code associated with the request service is generic (669, 185, 186, 187, 188) the second stop code is used. Using this allows the station to control which stop code is used in reporting.</p>
Receiving Service - Classification	<p>The classification of the consult (Outpatient, inpatient, administrative, community care, etc.).</p> <p>Consult services are divided into Primary Request Types based on the naming conventions of the service name and flags assigned to the request service in VISTA.</p>
Request Service	Characteristics (stop code, classification) of the consult request service that was ordered.
Request Service - From	Characteristics (stop code, classification) of the consult request service that was originally ordered.
Request Type	Indicates whether the request is for a Consult, Procedure or unknown.
Rurality	The rurality of the patients' geocoded VistA address.
Urgency	Urgency of the consult. Existing VISTA consult urgency statuses have been placed in a hierarchy of Routine or Stat.

Request Service Classification

Primary Request Type		
Administrative	Administrative consults	Administrative AdminCP DODMTF DODNonMTF ReturnToClinic TransferCOVID TravelingVeteran VCCPE
ClinicalConsult	Traditional in-house VA clinical care	Inpatient Interfacility Outpatient FutureCare_legacy MissingType MultipleTypes

ClinicalProcedure		ClinicalProcedure FutureCare_CP_legacy
CommunityCare	Replaces the former NON VA CARE Primary Request Type as of 10/28/2015.	Choice DOD Emergency NVC NVCC NVCCGEC OneConsult OneConsultGEC
Prosthetics	Request for prosthetic services	Prosthetics
Unknown	indicates the service cannot be classified. We have found several reasons for this to include a "Null" consult service naming convention for a request service previously named in the cube data	Unknown

Additionally note that VA Clinical Care is a category that contains the Primary Request Types of Clinical Consult and Clinical Procedure. VA Care is everything but Community Care (Administrative, Prosthetics, Clinical Consult, Clinical Procedure).

The Classification logic is as follows:

Classification	
Administrative	The Administrative Flag is set to "yes" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care.
CHOICE	The receiving service title contains "CHOICE"
Clinical Procedure	When the consult receiving service title contains the prefix "CP". It should not be used in combination with other naming conventions or flags with the exception of the legacy future care CP
DOD	Facilities have provided names of consult services which are Department of Defense consults. A standardized naming convention will be established at some point in the future.
DOD MTF	The consult title contains "DOD MTF"
DOD Non MTF	The consult title contains "DOD Non MTF"
Emergency	Consult title contains "COMMUNITY CARE-EMER"
FutureCare_legacy	The consult receiving service title contains the words "Future Care" or the abbreviation "FC" It should not be used in combination with other naming conventions or flags with the exception of Clinical Procedure
Future Care_CP_legacy	The consult receiving service title contains the words "Future Care" or the abbreviation "FC" along with the clinical procedure naming convention of "CP" These should not be used in combination with other naming conventions or flags other than those described
Inpatient	The consult receiving service title contains the word "Inpatient" or the abbreviation "Inpt" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care
Inter-Facility	The consult receiving service title contains the words "Inter-facility" or "Inter Facility" or the abbreviation "IFC" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care
Missing Type	The receiving service does not contain a naming convention or flag, or if the request type cannot be determined.
Multiple Types	The receiving service is identified as having more than one request type In most cases, the Receiving Service should have one Request Type. There are exceptions at this time. Multiple Types are allowed for Non VA Care because the National Program Office requires both a specific naming convention and an administrative flag. Multiple Types are also allowed for Future Care Clinical Procedures because the "CP" prefix must be used for Clinical Procedures. Future Care Clinical Procedures should contain both the naming convention for Clinical Procedures and the naming convention for Future Care. Prosthetics may contain more than one naming conventions/flag as well.
NVCC	The receiving service title contains with "NON VA CARE" and the administrative flag is set to "yes"
NVCCGEC	The receiving service title contains with "NON VA CARE GEC" and the administrative flag is set to "yes"
NVC	We have attempted to identify any old Fee/Purchased Care consult services which do not meet the current business rule naming conventions and include words like Fee, Contract, Purchased, NonVACare or FB.
OneConsult	The consult request service name contains with "COMMUNITY CARE"
OneConsultGEC	The consult request service name contains "COMMUNITY CARE-GEC"
Outpatient	The consult receiving service title contains the word "Outpatient". "Outpatient" or the abbreviation "Outpt" It should not be used in combination with other naming conventions or flags with the exception of Non VA Care
Prosthetics	The ProstheticsServiceFlag = "Y" or the consult service name begins with "Prosthetics" or contains the word "Prosthetics" and does not begin with NON VA CARE or the consult service name begins with "Eyeglass Request", "Contact Lens Request", "Home Oxygen Request" or "PCC Equipment Request" Note that the Prosthetics flag is set by a VISTA interface. If this flag is "Y" then the service is identified as Prosthetics regardless of any other naming

	convention or flag used for the service.
Return to Clinic	The request service is for a return to clinic appointment The consult title name contains "RTC"
TransferCOVID	Consult tile contains "TRANSFER COVID"
Traveling Veteran	The request service is associated with the traveling veteran coordinator service The consult title name contains "traveling veteran"

Measures

Name	
Appointments	Number of appointments linked to the consults in the cube
Appt Sched Day of Consult	The number of appointments that were scheduled the same day the consult was requested
Average Days Desire Date to Appt Date	The sum of the days between the appointment desire date and the appointment date divided by the number of appointments
Average Days from Appointment to Completed Consult	The average days between the appointment date time and the complete date * this calculation is limited to consults in complete status where the complete date time is greater than the appointment date time
Average Days from Earliest Date to Appointment	The average number of days from the Earliest Date (PID/clinically indicated date) of the consult to the date of the appointment. Negative values are set to 0.
Average Days from Earliest Date to Completed Consult	The average number of days from the Earliest Date (PID/clinically indicated date) of the consult to the day the consult hits complete status. * this calculation is limited to consults in complete status
Average Days from File Entry to Closed Consult	The average days from file entry date to closed consult (complete, cancelled, discontinued)
Average Days from File Entry to Completed Consult	The average days from file entry date to the day the consult hits complete status. * this calculation is limited to consults in complete status
Average Days from File Entry to First Completed	The average days from file entry date to the first time the consult was marked as completed. Applicable to Prosthetic consults that are re-opened.
Average Days from File Entry to First Active	The average days from file entry date to the first time the consult was in an active status Activities that change consult to active status: received, status change
Average Days from File Entry to First Forwarded From	Average days from file entry date to first forwarded from * this calculation is limited to consults that have a forwarded from activity
Average Days from File Entry to First Received	Average days from file entry date to the first received date * this calculation is limited to consults that have been received.
Average Days from File Entry to First Scheduled	Average days from file entry date to the first time the consult was in scheduled status * this calculation is limited to consults that have a scheduled activity and may differ from the days to appointment create date
Average Days from First Active to First Scheduled	The average days from the time the consult hits active status for the first time to the time the consult hits scheduled status for the first time * this calculation is limited to consults that hit both active status and scheduled status and where first scheduled date time is greater than first active date time
Average Days from First Forwarded From to Closed	The average days from the time the consult was first forward to closed (complete, cancelled, discontinued)
Average Days from First Forwarded From to First Scheduled	The average days from the time the consult was first forwarded to the time the consult was first scheduled * this calculation is limited to consults that have forwarded from and scheduled activities and where the scheduled activity occurred after the forwarded from
Average Days From File Entry Date to Appointment Made	The sum of the days between the consult create date and the appointment create date divided by the number of appointments
Average Days from File Entry Date to Appointment	The sum of the days between the consult request date and the appointment date divided by the number of appointments
Average Days to First Action	The sum of the days between the consult create date and the date the first action was taken on the consult divided by the number of consults
Closed Consults	The number of consults with a completed CPRS Status (Cancelled, Complete, Discontinued, and Discontinued/Edit)
Cancelled Consults	The number of consults with a cancelled CPRS Status
Consults Cancelled and Resubmitted	The number of consults that have a first cancelled date, and then a resubmitted date greater than the cancellation date

Closed LTE30 Days From Earliest Date	The number of consults closed (complete, cancelled, discontinued) less than or equal to 30 days from the earliest date (clinically indicated date) The "closed" date is the last known closure activity date (cancelled, complete, discontinued) which may not be the first closure activity date.
Closed LTE30 Days From File Entry Date	The number of consults closed less than or equal to 30 days from the file entry date The "closed" date is the last known closure activity date (cancelled, complete, discontinued) which may not be the first closure activity date.
Closed LTE48 Hours From File Entry Date	The number of consults closed less than or equal to 48 hours from the file entry date The "closed" date is the last known closure activity date (cancelled, complete, discontinued) which may not be the first closure activity date. * this measure is intended to be used for stat consults
Consults	The number of consults in the cube
Discontinued Consult	The number of consults in discontinued status * this number is a subset of Closed Consults
Elapsed Days GT2	The number of consults with an elapsed days greater than 2 * This measure uses the Elapsed Days dimension which has a different starting date for future care consults
Elapsed Hours From File Entry Date GT48	The number of consults with an elapsed hours from file entry date to complete or current date greater than 48
FBCS Consults	Number of consults with an authorization in the Fee Basis Claim System data
Forwarded From	The number of consults that have at least one forwarded from activity
Has RCT	Yes/No The Consult has at least one activity performed by the RCT - Referral Coordination Team role in the Consult Toolbox or the #RCT# comment (for older consults).
Open Consults	The number of consults with a "not completed" CPRS Status (Active, Partial Results, Pending, Renewed, Scheduled, Unreleased, and Not Recorded)
Open GT0 Days from Earliest Date	The number of consults currently open where today is greater than the Earliest Date (PID)
Open GT30 Days from Earliest Date	The number of consults currently open greater than 30 days from the Earliest Date (PID)
Open GT60 Days from Earliest Date	The number of consults currently open greater than 60 days from the Earliest Date (PID)
Open GT90 Days from Earliest Date	The number of consults currently open greater than 90 days from the Earliest Date (PID)
Partial Results GT 10 Days	The number of consults in a Partial Results CPRS Status where more than 10 days has elapsed since the appointment date
Pending GT 2 Business Days	The number of consults in a Pending CPRS Status where more than 2 days has elapsed since the last pending, typically the file entry date or the forwarded date. This measure only excludes weekends. Holidays are included.
Pending GT 7 Days	The number of consults in a Pending CPRS Status where more than 7 days has elapsed since the file entry or patient indicated date (future care, community care)
Percent Change of Closed Consults > 90 Days from Previous Period	The percent change from previous period of consults closed older than 90 days
Percent Change of Consults From Previous Period	The percent change of consults from previous period at the same level indicated, e.g., FY21 would be FY20, Q2 would be Q1, Feb would be Jan.
Percent of Consults by CPRS Status	The percent of consults by CPRS Status
Percent of Consults Closed	The percent of consults closed
Percent of Consults Open	The percent of consults open
Percent of Consults With Appointment	The number consults with a linked appointment divided by the number of consults times one hundred.
Scheduled Linked to Past Appt	The number of consults in a scheduled status where the last appointment date has passed.
Scheduled Not Linked to Appt	The number of consults scheduled without a linked appointment
Unique Patients	The number of unique patients with a consult (unique patients in the cube)
Unscheduled No Activity GT 14 Days	Consult is in active or pending status and there has been no activity in the past 14 days and today is within 30 days of the PID
Unscheduled No Activity GT 30 Days	Consult is in active or pending status and there has been no activity in the past 30 days and today is within 30 days of the PID

RCI Dashboard Measures

Name	Description
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% Consults with Sched Pref Fully Documented	The percent of consults with scheduling preferences fully documented via the Consult Toolbox.
% Consults with Sched Pref Fully Documented As expected	The percent of consults with scheduling preferences fully documented via the Consult Toolbox at file entry or on or before forwarding to community care.
CC Eligibility	A best guess at the community care eligibility of the patient. This is based on DST, consult toolbox usage, and the consult reason.
CC Opted Out	The number of consults where an opt out is documented, either via, DST, consult toolbox, or the VA appointment comment.
Has Eligibility Documented	The number of consults with a community care eligibility documented. This is based on DST, consult toolbox usage, and the consult reason.
Opt out documented	The number of consults where an opt out is documented.
Opt out expected	The number of consults where an opt out is expected to be documented. This is based on consults that fit mission criteria based on the file entry date, PID, and linked appointment date time.
% opt out documented	The percent of consults where an opt out is expected to be documented and it is documented.

Additional Information

Primary Data Sources	<ul style="list-style-type: none"> • Appt.Appointment • Con.Consult • Con.ConsultActivity • Con.ConsultFactor • Dim.AppointmentType • Dim.AssociatedStopCode • Dim.Institution • Dim.Location • Dim.RequestService • Dim.StopCode • Outpat.Visit • SPatient.SPatient • SPatient.SConsultActivityComment • SPatient.SConsultReason
Update Frequency	<p>Daily</p> <p>The Consult Cube is updated daily, in the morning, post CDW processing. Due to reliance on the CDW data distribution process the update time will vary. Once updated, the data is current through midnight.</p>
SSAS Server	Vhacdvdwhmdm09.vha.med.va.gov VSSC_Consult
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplID=4377
Link to Product	https://pyramidselfregistration.cdw.va.gov/ViewerOnly.aspx?id=d92837d2-03ed-4c0d-b584-c4e952ee339d

Consults - Interfacility

Friday, December 17, 2021 11:42 AM



Overview

Purpose	The purpose of the Consults - Interfacility report is to display data associated with Interfacility (IFC) consults in VistA. An interfacility consult is defined as a consult with a remote role of PLACER (the site that ordered/sent the consult) or FILLER (the site that received the consult)
What's New	n/a
Model Data Dictionary	https://app.powerbigov.us/groups/me/apps/057a6693-7190-4fd4-9491-f8a038913689/reports/a966acaa-e079-4b2e-8b92-fe1c912e357b/a779aa5089022b90c4c0?ctid=e95f1b23-abaf-45ee-821d-b7ab251ab3bf
Primary Data Sources	<ul style="list-style-type: none">• Con.Consult• Con.ConsultActivity• Con.ConsultFactor
Update Frequency	This report is updated daily
VSSC Website Location	https://vssc.med.va.gov/VSSCMainApp/products.aspx?PgmArea=45
Helpdesk	https://vssc.med.va.gov/troubleshooter/default.aspx?ramplID=5179
Power BI Data hub	 Consults - model Semantic model
Power BI End Point	Data Source=powerbi://api.powerbigov.us/v1.0/myorg/VSSC_Access?readonly;Initial Catalog=Consults - model;

Report Page Catalog

Report Page	Description
At a Glance	The purpose of this report page is to display high-level summary data for Interfacility Consults. PLACER and FILLER counts may not much due to how the data is capture for Interfacility Consults between a VistA and Oracle Health facility.
IFC Volume by Remote Role	The purpose of this report page is to Interfacility Consult volumes by the Remote Role (FILLER and PLACER).
IFC Volume by VISN	The purpose of this report page is to display which VISNs are acting as the PLACER and FILLER.
IFC Volume - Map	The purpose of this report page is to display Remote Role by geographical location.
IFC Completion by TIU Modality	The purpose of this report page is to display the modality of the location of the TIU note that is completing Interfacility Consults.
IFC Patient Details	The purpose of this report page is to display the consult and patient details of individual consults.
IFC Request Service List	The purpose of this report page is to display the configuration of Request Services associated with Interfacility Consults.

Model ERD

Please see the data definitions for [Consults - Report/Model](#)

Consults - Report/Model

Friday, December 17, 2021 11:42 AM



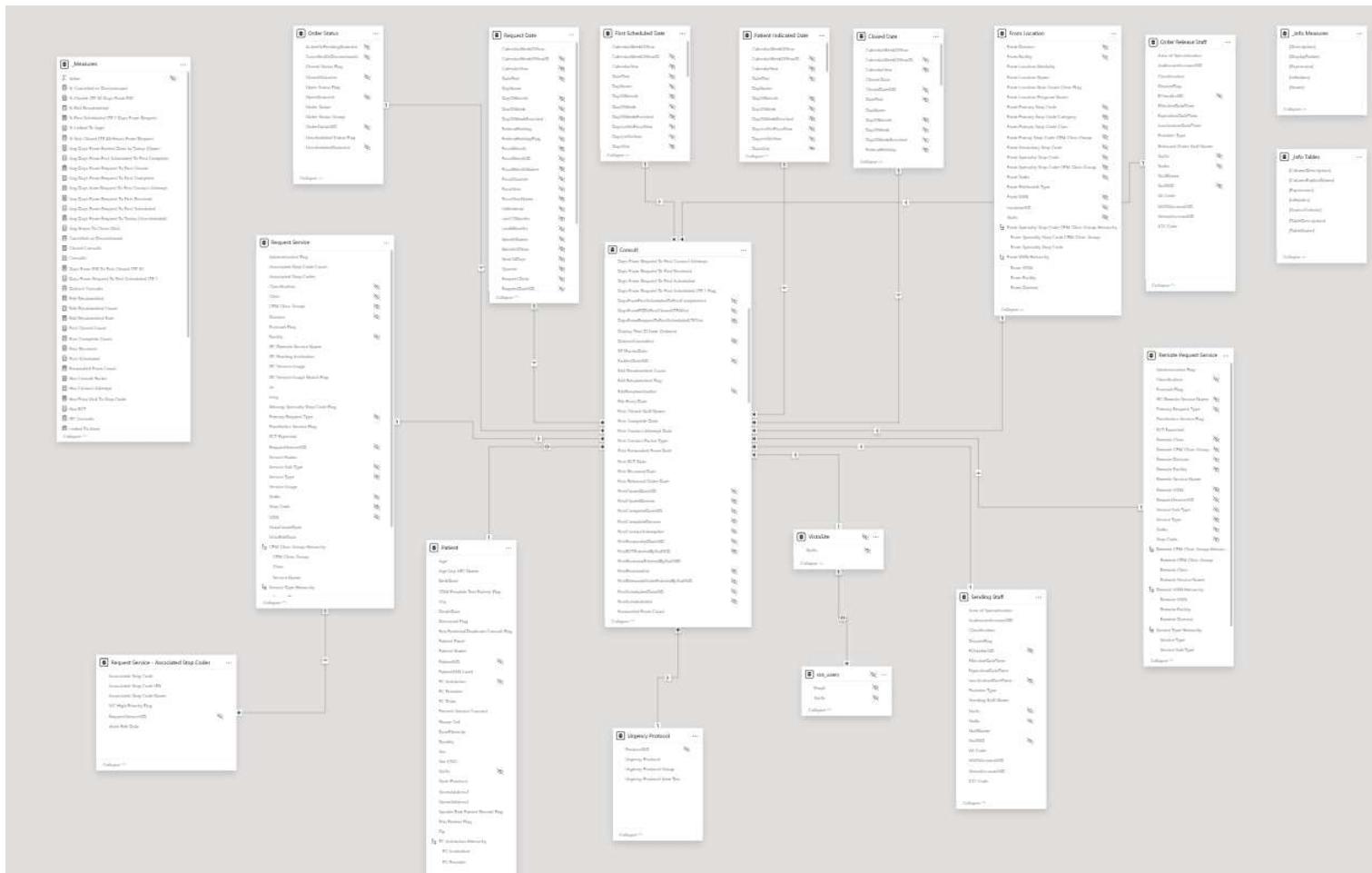
Overview

Purpose/Description	The purpose of the Consult Model/Report is to display data associated with consults ordered in VistA. The model includes both PLACER and FILLER consults of an interfacility consult. Due to the nature of how VistA and Oracle Health interact, PLACER and FILLER counts may not match when looking at aggregate data.
What's New	n/a
Model Data Dictionary	
Primary Data Sources	<ul style="list-style-type: none">• Con.Consult• Con.ConsultActivity• Con.ConsultFactor
Update Frequency	This report is updated daily
VSSC Website Location	https://vssc.med.va.gov/VSSCMainApp/products.aspx?PgmArea=45
Helpdesk	https://vssc.med.va.gov/troubleshooter/default.aspx?ramplID=5179
Power BI Data hub	
Power BI End Point	Data Source=powerbi://api.powerbigov.us/v1.0/myorg/VSSC_Access?readonly;Initial Catalog=Consults - model;

Report Page Catalog

Report Page	Description
Request Service List	The purpose of the Request Service List page is to display configuration details of a Consult Request Service.
UAT - Open Consults - Summary	The purpose of the UAT - Open Consults - Summary page is to display various chart visuals related to open consults.
Open Consults - Details	The purpose of the Open Consults - Details page is to display consult/patient level details for open consults.
Closed Consults - Details	The purpose of the Closed Consults - Details page is to display consult/patient level details for closed consults.
Patient Consults	The purpose of the Patient Consults page is to display consults/patient level details for a specific patient.
UAT - Stat Consults	The purpose of the UAT - Stat Consults page is to summarize data specifically related to Stat consults.
UAT - High Risk Consults	The purpose of this page is to show data related to consults flagged as high risk via the Consult Toolbox.
UAT - Community Care Eligibility	The purpose of the UAT - Community Care Eligibility page is to display summarized data specifically related to community care eligibility and opt in/out. Community care eligibility is based on the SEV consult toolbox factor. Opt in/out is based on the VCC consult toolbox factor.
UAT - Process Metrics	The purpose of the UAT - Process metrics page is to display various measures associated with internal processes/workflow.
UAT - Closure Metrics	The purpose of this page is to show measures based on the first closed date of a consult.

Model ERD



Consult Echo Cardio Report

Tuesday, March 22, 2022 1:37 PM



What's New

Purpose

Provide information related to Echo Cardio consults available in Vista. This cube includes consults entered in VISTA after 10/01/2011 or from FY12 forward. Open consults can represent unfilled and pending patient care needs. Patient safety can be compromised if they are indiscriminately closed. For this reason, do not close consults until the properly reviewed.

The Consult - Echo Scheduling Effort report details an effort to encourage sites to directly schedule echo cardio from primary care (stop code 323) rather than having to get cardiology to do so. This would save time and allow the veteran to be seen more timely. It uses consult toolbox data for First Call Documented, Second Call Documented, and Letter Sent Documented. Additionally, we use Consult Cube data for Scheduled Same Day as File Entry Date.

The Econsult report displays associated with the visits, not consults, outlined in the Workload Specifications for the Electronic Consult (E-Consult) Program Memo and summarized below.

Visit Date Time – When the Econsult session was conducted.

Location Name – The name of the Econsult location or clinic name (must contain E-consult).

Assigned 697 – While the primary stop code selected should represent the clinical group/service providing the consultation, the secondary stop code require is 697 (chart consult). This is a yes/no field indicating whether 697 was assigned to the Econsult as the secondary stop code.

Assigned Char4 – As outlined in the memo, each clinic providing services under E-consult must include a VISTA clinic setup path utilizes one of the National Four Character Codes based on the type of clinician. E.G., CNSZ for Physicians, Psychiatrists and Providers not identified in another category. This is a yes/no field indicating whether the Econsult had one assigned.

Columns

Division	The division associated with the consult
Service Name	The consult request service name. This is the name of the consult.
Consults	The number of cardio echo consults
Consults in Toolbox	The number of cardio echo consults that have utilized consult toolbox
Scheduled Same Day as FED	The consult was scheduled the same day as file entry date
Avg Days FED to First Sched	The average days from file entry date to first scheduled action
Avg Days FED to Appt Date	The average days from file entry date to appointment date
First Call Documented	Consults that have a first call documented through consult toolbox
Avg Days FED to First Call	The average days from file entry date to first call documented

% First Call Documented	Percent of total consults that have a first call documented
Second Call Documented	Consults that have a second call documented through consult toolbox
% Second Call Documented	Percent of total consults that have a second call documented
Letter Sent Documented	The number of consults that have a letter sent documented in consult toolbox
% Letter Sent Documented	The percent of total consults that have a letter sent documented in consult toolbox

Additional Information

Primary Data Sources	<ul style="list-style-type: none"> • VSSC Consult Cube • CDWWork.Con.ConsultFactor
Update Frequency	Daily
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?rampID=5190
Link to VSSC Website Location	Consult - Echo Scheduling Effort - Report Viewer (va.gov)
SSAS Server	Vhacdwdwhmdm09.vha.med.va.gov

Consult Switchboard

Tuesday, March 22, 2022 1:42 PM



Purpose/Rationale:

The Consult Switchboard has been created to provide consult information in a one stop shop. Please use this SharePoint page as a resource for Consult related reports, dashboards and information. There are links to a number of VSSC Consult Reports, Consult Toolbox Reports, Related Dashboards and Help and Information, including a link to the IVC Consult Management SharePoint.

The intent of this report is to provide information which will assist users in completing assigned tasks, implementing new business rules and investigating consults in order that they may appropriately address these consults to bring them to an appropriate status.

The Consult Switchboard currently has 4 sections:

1. Consult Reports
2. Consult Toolbox Reports
3. Related Dashboards
4. Help and Information

1. Consult Reports - Each of these reports has their own Data Definitions and a link to the Help Desk within the report.

- [Consult - Activity Measures - Power BI \(powerbigov.us\)](#)
This report displays active VA Care and Community Care measures in the Electronic Technical Manual (eTM). This report has been updated for FY23.
- [Consult Trend - Report - Power BI \(powerbigov.us\)](#)
This report displays Open Consult information, trended in various ways, based on snapshots taken on the 1st and 15th of every month.
- [Consult - Econsults - Report Viewer \(va.gov\)](#)
The Econsult report displays associated with the visits, not consults, outlined in the Workload Specifications for the Electronic Consult (E-Consult) Program Memo and summarized below.
- [Consult - IFCStatusMismatch - Report Viewer \(va.gov\)](#)
Consult SSRS Report that details mismatches in status in interfacility consults.
- [Consult - Request Service Classification - Report Viewer \(va.gov\)](#)
This report is displays consult request services and their assigned primary request type, classification, and stop code in the Consult Cube.

2. Consult Toolbox Reports - Each of these reports has their own Data Definitions and a link to the appropriate Help Desk within the report.

- [Consult Toolbox - Report - Power BI \(powerbigov.us\)](#)
Consult Toolbox Reports on VSSC site
- [PBI - Power BI Report Server \(va.gov\)](#)
CDW Consult Toolbox Reports from IVC

3. Related Dashboards – These Dashboards have links to Data Definitions and the appropriate Help Desk within the Dashboards

- [ConsultCube_Dashboard-20230302 | Pyramid Analytics \(va.gov\)](#)
- [CPM - Dashboard - Power BI \(powerbigov.us\)](#)
- [Consult - RCI_Portal - Report Viewer \(va.gov\)](#)
- [Integrated Care - Integrated Care \(palantirgov.com\)](#)

4. Help and Information – These are helpful links for Consult Information, Help Desk tickets, Definitions and requesting access to PHI/SSN level detail

- [Consult Switchboard Definitions in One Note \(Web view\)](#)
- [IVC Consult Management - Home \(sharepoint.com\)](#)
- [VSSC Consult Page \(va.gov\)](#)
- [VSSC Help Desk \(va.gov\)](#)
- [PHI/SSN Access](#)

Additional Information

Primary Data Sources	-
Update Frequency	Daily – though various reports within the Switchboard have individual update schedules.
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?rampID=2814
Link to VSSC Website Location	VHA Consult Switchboard (sharepoint.com)
Server	SharePoint

Consult ToolBox - Community Care Viewer Report

Wednesday, October 7, 2020 1:38 PM



Most Recent Updates:

Date	Description
10/7/2020	Data definitions created
10/7/2020	Report created

Purpose/Rationale:

This report shows detailed information from the Consult Toolbox broken down by Service Name. It shows various consult information such as Community Care Provider, Last Appointment Date, and Action Due (the next step in the Consult Toolbox process).

Typical Use of Data:

This report can be used for the following:

- Determining the number of community care consults across the VAMCs;
- Understanding where the consults are occurring;
- Identifying the next actions required in the Consult Toolbox process;
- Analyzing the amount of time for each step in the consult toolbox life cycle;
- Reviewing and trending average community care wait time based on consult toolbox data;
- Tracking.

Target Audience:

National, VISN & VAMC Community Care staff

Facility Leadership

Group Practice Manager

Referral Coordination Teams

Data Analysts

Data Sources:

Primary data source:

All the following tables are used from the CDW servers (vhacdwa01.vha.med.va.gov)
con.consult, con.consultactivity, con.consultfactor

Update Frequency:

Daily

Columns in the report in order from left to right and descending order:

Consult Toolbox – Community Care Viewer Report

****Note: Measures are reported by facility***

- 1) **Station:** Sta6a where the consult was entered

- 2) **Patient Count:** the total number of patients with consults under the assigned service name.
- 3) **Avg NN Days After CID:** NN is the average days from the Clinically Indicated Date to today for the consults within the particular service name.
- 4) **Avg NN Days Since Order:** NN is the average days from the Request Date to today for the consults within the particular service name.
- 5) **Service Name:** The request service to which the community care consult is assigned.
- 6) **Patient Name and Last 4:** Name of the patient for which care was referred, and the last four digits of the SSN for the patient.
- 7) **Last Appt Date:** The date and time of the last scheduled appointment.
- 8) **Comm Care Provider:** The community care provider. This is free form text from the FactorData column when the ConsultFactorType = 'PSP' or 'CCR'. If there is a 'PSP' that provider is used otherwise 'CCR' provider is used.
- 9) **Urgency:** The level of urgency associated with the consultation request—always STAT or ROUTINE.
- 10) **Request Date:** This is the date and time the order was released. This is generally the same date as the File Entry Date.
- 11) **Clinically Indicated Date:** The date by which the provider wants the veteran to receive the care needed.
- 12) **Days Late:** The number of days between the CID and today's date
- 13) **Days Old:** The number of days between the Request Date and today's date
- 14) **CPRS Status:** The status of the consult in CPRS/VISTA.
- 15) **Reset Date:** The request date or if present the most recent activity date time associated with one of the following activities: RECEIVED, STATUS CHANGE, FORWARDED FROM, EDIT/RESUBMITTED, FWD TO REMOTE SERVICE, CPRS RELEASED ORDER.
- 16) **Inpt/Outpt:** Is the care required inpatient or outpatient?
- 17) **Comm Care Approved:** Date the care was approved by Community Care.
- 18) **Docs Uploaded to Portal:** The date and time that the VA uploaded documents needed to schedule the consult to the third party provider.
- 19) **Choice Opt In Out:** Whether the consult in question was opted in or out under the CHOICE Act, and the date assigned to that decision.
- 20) **Community Care Program:** The community care program name selected when the community care staff approved the consult request.
- 21) **Care Coord Level:** The most recent care coordination level assigned whether it is an administrative, clinical triage, or initial level assigned.
- 22) **First, Second, Third Records Attempt:** The entry date and time when it was recorded that the

first, second, and third request to obtain records from the community care provider was made, respectively.

- 23) **Records Received Date:** The entry date and time when it was recorded that records were received from the provider after the community care appointment.
- 24) **Letter Date:** The entry date and time when it was recorded that an Unable to Contact letter is sent to the Veteran, generally after unsuccessful scheduling via calls.
- 25) **Referred for Disposition:** The entry date and time when it was recorded that the consult was referred back to the ordering provider for disposition because of an unsuccessful scheduling effort.
- 26) **Date of Birth:** The birth date of the veteran.
- 27) **Consult UID:** The station number and the consult IEN assigned in VISTA/CPRS separated with a hyphen.

Consult ToolBox - Unable to Schedule Report

Monday, November 9, 2020 1:38 PM



Most Recent Updates:

Date	Description
11/9/2020	Data definitions created
11/9/2020	Report created
9/15/2023	Added 4 th Unable to Schedule Reason

Purpose/Rationale:

This report displays consult toolbox consult information based on consults where the US1, US2, or US3 factor has been added. It shows various consult information such Facility, File Entry Date, Consult SID, Patient Name and SSN. It also totals consults by Unable to Schedule reason.

Typical Use of Data:

This report can be used for the following:

- Determining the number of Unable to Schedule (UTS) community care consults across the VAMCs;
- Understanding the reasons that Consults are Unable to be Scheduled;
- Identifying the next step for UTS consults;
- Reviewing and trending UTS consults;
- Tracking UTS consult totals.

Target Audience:

National, VISN & VAMC Community Care staff

Facility Leadership

Group Practice Manager

Referral Coordination Teams

Data Analysts

Data Sources:

Primary data source:

All the following tables are used from the CDW servers (vhacdwa01.vha.med.va.gov)
con.consult, con.consultactivity, con.consultfactor

Update Frequency:

Daily

Columns in the report in order from left to right and descending order:

Consult Toolbox – Unable to Schedule Report

- 1) **Facility:** Facility Name where the consult was entered
- 2) **Total Consults Unable to Schedule:** The number of Consults that have a toolbox factor of US1 (Unable to Schedule - Prefers VA/No Capacity), US2 (Unable to Schedule - No Comparable Service), or US3 (Unable to Schedule - Awaiting Spec Service) by facility, VISN, or national.
- 3) **Unable to Schedule - Prefers VA/No Capacity (US1):** Total Consults that have a toolbox factor of US1 assigned. It was determined that the veteran preferred to use VA services or there wasn't enough capacity in the community.
- 4) **Unable to Schedule - No Comparable Service (US2):** Total Consults that have a toolbox factor of US2 assigned. The consult was unable to be scheduled because it was determined that a comparable service was not available.
- 5) **Unable to Schedule - Awaiting Spec Service (US3):** Total Consults that have a toolbox factor of US3 assigned. The veteran was unable to be scheduled due to a special service.
- 6) **File Entry Date:** the date and time the consult was created.
- 7) **Consult SID:** The unique identifier for the consult assigned by the CDW.

- 8) **Service Name:** The request service to which the community care consult is assigned.
- 9) **Patient Name:** Name of the patient for which care was referred, and the last four digits of the SSN for the patient.
- 10) **Patient SSN:** The Social Security Number of the patient for which the consult was created.
- 11) **Earliest Date:** The date by which the provider or veteran wants to receive the care needed.
- 12) **Stop Code:** The Stop Code of the Consult assigned from the service name.
- 13) **CPRS Status:** The status of the consult in CPRS/VISTA.
- 14) **Service Connection:** The assigned Service Connection percentage of the veteran.
- 15) **Purple Heart Status:** The assigned purple heart status of the veteran.
- 16) **Unable to Schedule - Prefers VA/No Capacity (US1):** The date and time the scheduler assigned a toolbox factor of US1. It was determined that the veteran preferred to use VA services or there wasn't enough capacity in the community.
- 17) **Unable to Schedule - No Comparable Service in the Community (US2):** The date and time the scheduler assigned a toolbox factor of US2. The consult was unable to be scheduled because it was determined that a comparable service in the Community was not available.
- 18) **Unable to Schedule – Receiving VA Care/Awaiting Specialized Service (US3):** The date and time the scheduler assigned a toolbox factor of US3. The consult for a specialized VA service was unable to be scheduled but the Veteran's care needs are being met in VA while waiting for an available appointment (e.g., receiving mental health care within any 500 series stop code while awaiting specialized psychotherapy).
- 19) **Unable to Schedule – Not Receiving VA Care in the Service/Awaiting Specialized Care (US4):** The date and time the scheduler assigned a toolbox factor of US4. The Consult for a specialized VA service was unable to be scheduled and the Veteran is not receiving care in the same service. (For example, a Veteran not receiving care in a 500 series stop code who is waiting for a specific Psychotherapy start date although there may be capacity within 390 days.)

Consult ToolBox - Forwarded by Reason

Monday, November 9, 2020 1:38 PM



Most Recent Updates:

Date	Description
8/9/2023	Data definitions created
11/9/2020	Report created

Purpose/Rationale:

This report displays consult toolbox consult information based on consults where the last forwarded date is equal to the COI factor activity date and having a forwarded reason listed below.

Typical Use of Data:

This report can be used for the following:

- Determining the number of forwarded community care consults across the VAMCs;
- Understanding the reasons that Consults are Forwarded;
- Identifying the next step for these consults;
- Reviewing and trending forwarding consults;
- Tracking forwarded consult totals.

Target Audience:

National, VISN & VAMC Community Care staff
Facility Leadership
Group Practice Manager
Referral Coordination Teams
Data Analysts

Data Sources:

Primary data source:

All the following tables are used from the CDW servers (vhacdwa01.vha.med.va.gov)
con.consult, con.consultactivity, con.consultfactor

Update Frequency:

Daily

[Consult ToolBox SharePoint](#)

[Consult ToolBox Data Definitions](#)

Reason	OLD CONSULT	NEW Consult Factor
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	FACTOR TEXT	Text
Nature of the care or services required by the veteran	SEV-CC Eligibility: BMI-Nature or simplicity of service	SEV-CC Eligibility: BMI-Nature of the care or services required by the veteran
Frequency the veteran requires	SEV-CC Eligibility: BMI-Frequency of service	SEV-CC Eligibility: BMI-Frequency the veteran requires
Need for an attendant	SEV-CC Eligibility: BMI-Need for an attendant	SEV-CC Eligibility: BMI-Unusual or excessive burden UEXB-The need for an attendant
Potential for improved continuity of care	SEV-CC Eligibility: BMI-Potential for improved continuity of care	SEV-CC Eligibility: BMI-Potential for improved continuity of care
Difficulty in Traveling	SEV-CC Eligibility: BMI-Difficulty in traveling /r/n	SEV-CC Eligibility: BMI-Unusual or excessive burden UEXB-Medical condition affects travel
Distance between the Veteran and the facility		SEV-CC Eligibility: BMI-Distance between the veteran and the facility
Timeliness of available appointments		SEV-CC Eligibility: BMI-Timeliness of available appointments
Quality of the care provided		SEV-CC Eligibility: BMI-Quality of the care provided
Excessive driving distance; geographical challenges		SEV-CC Eligibility: BMI-Unusual or excessive burden UEXB-Geographical or environment factors
Whether care and services are available from a VA facility that is reasonably accessible		SEV-CC Eligibility: BMI-Unusual or excessive burden UEXB-Care or service availability
Whether there is a compelling reason the veteran needs to receive care and services from a non VA facility		SEV-CC Eligibility: BMI-Unusual or excessive burden UEXB-Compelling reason to receive non VA care

Reason	CONSULT FACTOR TEXT
Grandfathered from Choice 40 based on address	SEV-CC Eligibility: Grandfathered
Old BMI reason - still used occasionally	SEV-CC Eligibility: Hardship
Lives in a state without a full-service VA	SEV-CC Eligibility: No full-service VHA facility
Access Standard - drive time	SEV-CC Eligibility: Drive time
Mental Health/COMPACT Act care	SEV-CC Eligibility: COMPACT
Drive time because local facility doesn't offer specific service (ex dermatology VS MOHs) (Old)	SEV-CC Eligibility: Specific clinical service not available at VA
Access standard - wait time	SEV-CC Eligibility: Wait time
congress-decided quality issues (no one should be using it as	SEV-CC Eligibility: 1703(e)

no one qualifies)	
Drive time because local facility doesn't offer specific service (ex dermatology VS MOHs) (NEW)	SEV-CC Eligibility: Drive time (specific clinical service)
Not sure where this came from, shouldn't exist	SEV-CC Eligibility: Eligibility previously established
Access standard - wait time (radiology only, should be lumped together with other wait time)	SEV-CC Eligibility: No clinical appointments within Wait Time std
Veteran otherwise eligible but enrollment not completed	SEV-CC Eligibility: HEC update pending
Drive time because local facility doesn't offer specific service (ex dermatology VS MOHs) (Upcoming)	SEV-CC Eligibility: Drive Time Eligible: not available at any VA in DT

Columns in the report in order from left to right and descending order:

Consult Toolbox – Unable to Schedule Report

- 1) **Facility:** Facility Name where the consult was entered
- 2) **Total Consults Unable to Schedule:** The number of Consults that have a toolbox factor of US1 (Unable to Schedule - Prefers VA/No Capacity), US2 (Unable to Schedule - No Comparable Service), or US3 (Unable to Schedule - Awaiting Spec Service) by facility, VISN, or national.
- 3) **Unable to Schedule - Prefers VA/No Capacity (US1):** Total Consults that have a toolbox factor of US1 assigned. It was determined that the veteran preferred to use VA services or there wasn't enough capacity in the community.
- 4) **Unable to Schedule - No Comparable Service (US2):** Total Consults that have a toolbox factor of US2 assigned. The consult was unable to be scheduled because it was determined that a comparable service was not available.
- 5) **Unable to Schedule - Awaiting Spec Service (US3):** Total Consults that have a toolbox factor of US3 assigned. The veteran was unable to be scheduled due to a special service.
- 6) **File Entry Date:** the date and time the consult was created.
- 7) **Consult SID:** The unique identifier for the consult assigned by the CDW.
- 8) **Service Name:** The request service to which the community care consult is assigned.
- 9) **Patient Name:** Name of the patient for which care was referred, and the last four digits of the SSN for the patient.
- 10) **Patient SSN:** The Social Security Number of the patient for which the consult was created.
- 11) **Earliest Date:** The date by which the provider or veteran wants to receive the care needed.
- 12) **Stop Code:** The Stop Code of the Consult assigned from the service name.
- 13) **CPRS Status:** The status of the consult in CPRS/VISTA.
- 14) **Service Connection:** The assigned Service Connection percentage of the veteran.
- 15) **Purple Heart Status:** The assigned purple heart status of the veteran.

- 16) **Unable to Schedule - Prefers VA/No Capacity (US1):** The date and time the scheduler assigned a toolbox factor of US1. It was determined that the veteran preferred to use VA services or there wasn't enough capacity in the community.
- 17) **Unable to Schedule - No Comparable Service (US2):** The date and time the scheduler assigned a toolbox factor of US2. The consult was unable to be scheduled because it was determined that a comparable service was not available.
- 18) **Unable to Schedule - Awaiting Spec Service (US3):** The date and time the scheduler assigned a toolbox factor of US3. The veteran was unable to be scheduled due to a special service.

Consult ToolBox - Justification Reason

Monday, November 9, 2020 1:38 PM



Most Recent Updates:

Date	Description
8/9/2023	Data definitions created
11/9/2020	Report created

Purpose/Rationale:

This report displays the Justification Reason from the Consult Reason field.

Typical Use of Data:

This report can be used for the following:

- Determining the number of forwarded community care consults across the VAMCs;
- Understanding the reasons that Consults are Forwarded;
- Identifying the next step for these consults;
- Reviewing and trending forwarding consults;
- Tracking forwarded consult totals.

Target Audience:

National, VISN & VAMC Community Care staff

Facility Leadership

Group Practice Manager

Referral Coordination Teams

Data Analysts

Data Sources:

Primary data source:

All the following tables are used from the CDW servers (vhacdwa01.vha.med.va.gov)
con.consult, con.consultactivity, con.consultfactor

Update Frequency:

Daily

Columns in the report in order from left to right and descending order:

Consult Toolbox – Unable to Schedule Report

- 1) **Facility:** Facility Name where the consult was entered
- 2) **Total Consults Unable to Schedule:** The number of Consults that have a toolbox factor of US1 (Unable to Schedule - Prefers VA/No Capacity), US2 (Unable to Schedule - No Comparable Service), or US3 (Unable to Schedule - Awaiting Spec Service) by facility, VISN, or national.

- 3) **Unable to Schedule - Prefers VA/No Capacity (US1):** Total Consults that have a toolbox factor of US1 assigned. It was determined that the veteran preferred to use VA services or there wasn't enough capacity in the community.
- 4) **Unable to Schedule - No Comparable Service (US2):** Total Consults that have a toolbox factor of US2 assigned. The consult was unable to be scheduled because it was determined that a comparable service was not available.
- 5) **Unable to Schedule - Awaiting Spec Service (US3):** Total Consults that have a toolbox factor of US3 assigned. The veteran was unable to be scheduled due to a special service.
- 6) **File Entry Date:** the date and time the consult was created.
- 7) **Consult SID:** The unique identifier for the consult assigned by the CDW.
- 8) **Service Name:** The request service to which the community care consult is assigned.
- 9) **Patient Name:** Name of the patient for which care was referred, and the last four digits of the SSN for the patient.
- 10) **Patient SSN:** The Social Security Number of the patient for which the consult was created.
- 11) **Earliest Date:** The date by which the provider or veteran wants to receive the care needed.
- 12) **Stop Code:** The Stop Code of the Consult assigned from the service name.
- 13) **CPRS Status:** The status of the consult in CPRS/VISTA.
- 14) **Service Connection:** The assigned Service Connection percentage of the veteran.
- 15) **Purple Heart Status:** The assigned purple heart status of the veteran.
- 16) **Unable to Schedule - Prefers VA/No Capacity (US1):** The date and time the scheduler assigned a toolbox factor of US1. It was determined that the veteran preferred to use VA services or there wasn't enough capacity in the community.
- 17) **Unable to Schedule - No Comparable Service (US2):** The date and time the scheduler assigned a toolbox factor of US2. The consult was unable to be scheduled because it was determined that a comparable service was not available.
- 18) **Unable to Schedule - Awaiting Spec Service (US3):** The date and time the scheduler assigned a toolbox factor of US3. The veteran was unable to be scheduled due to a special service.

Consults - HSRM Cycle Time Report

Tuesday, March 22, 2022 1:39 PM

Data Definitions for this report in One Note coming soon.

Until then, please click on the Data Definitions button in the report to read the original Word version of the definitions.

Econsults List Report

Tuesday, March 22, 2022 1:40 PM



What's New

Purpose

The Econsult report displays associated with the visits, not consults, outlined in the Workload Specifications for the Electronic Consult (E-Consult) Program Memo and summarized below.

PHI Access

The level of access you need is granted either locally by your CUPS/NSSD point of contact (POC) or by National Data Systems (NDS).

- You will find a complete set of instructions and forms for submitting a request for the access you need at the following link:
<http://vaww.vhadataportal.med.va.gov/Support/FAQs.aspx#DataAccessVSSC>
- This report will tell you who your local NSSD contacts are, complete with phone number and email address:
https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fApps%2fNSSD%2fProd%2fNSSD_POCs&rs:Command=Render
- Also, you can check your access at any time with the following report:
<https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fNSSDReports%2fCprsNssdUserCredsProd&rs:Command=Render>

Dimension/Slicer Definitions (optional)

Visit Date Time – When the Econsult session was conducted.

Location Name – The name of the Econsult location or clinic name (must contain E-consult).

Assigned 697 – While the primary stop code selected should represent the clinical group/service providing the consultation, the secondary stop code require is 697 (chart consult). This is a yes/no field indicating whether 697 was assigned to the Econsult as the secondary stop code.

Assigned Char4 – As outlined in the memo, each clinic providing services under E-consult must include a VISTA clinic setup path utilizes one of the National Four Character Codes based on the type of clinician. E.G., CNSZ for Physicians, Psychiatrists and Providers not identified in another category. This is a yes/no field indicating whether the Econsult had one assigned.

Measure Definitions

Additional Information

Primary Data Sources	<ul style="list-style-type: none">• VSSC Consult Cube• CDWWork.Con.ConsultActivity
Update Frequency	Daily
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplID=5157
Link to VSSC Website Location	https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Access/Consult++Econsults&rs:Command=Render
SSAS Server:	VHACDWDWHMDM08

IFC Mismatch Consult Report

Tuesday, March 22, 2022 1:40 PM



What's New

Purpose

Details mismatches in status in interfacility consults.

PHI Access

The level of access you need is granted either locally by your CUPS/NSSD point of contact (POC) or by National Data Systems (NDS).

- You will find a complete set of instructions and forms for submitting a request for the access you need at the following link:
<http://vaww.vhadataportal.med.va.gov/Support/FAQs.aspx#DataAccessVSSC>
- This report will tell you who your local NSSD contacts are, complete with phone number and email address:
https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fApps%2fNSSD%2fProd%2fNSSD_POCs&rs:Command=Render
- Also, you can check your access at any time with the following report:
<https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fNSSDReports%2fCprsNssdUserCredsProd&rs:Command=Render>

Dimension/Slicer Definitions (optional)

Field	Definition
Facility	Receiving consult facility for the placer consult
Placer consult	The consult being sent
Filler consult	The consult being received

Measure Definitions

Additional Information

Primary Data Sources	<ul style="list-style-type: none"> • Con.Consult • Appt.Appointment • Con.ConsultActivity • Dim.AppointmentType • Dim.AssociatedStopCode • SPV.Dim.Institution • SPV.Dim.Location • Dim.RequestService • Dim.StopCode • SPatient.SPatient
Update Frequency	Daily
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?rampID=5072
Link to VSSC Website Location	Consult - IFCStatusMismatch - Report Viewer (va.gov)
SSAS Server:	VHACDWDWHMDM08

Veteran Integrated Care Dashboard

Tuesday, March 22, 2022 1:42 PM



What's New

The Veteran Integrated Dashboard is a joint application for the Office of Community Care and Access Office that enables operational workflows and standardized reporting across all levels of the organization. The Dashboard serves as a single source of truth for key metrics related to critical areas including Scheduling Timeliness, Utilization and Cost of Care, and is based on an integrated data model consisting of Consults, Referrals, Claims and Payments.

The Veteran Access to Care Dashboard enables operational workflows and standardized reporting across all levels of the organization. It functions as a single source of truth for key metrics related to critical areas including Scheduling Timeliness, Utilization and Cost of Care, both within the VA as well as in the community. The audience for this dashboard ranges from National leadership to field-level users, all of whom have access to the National, VISN, and Station-focused views which are backed by the same trusted VHSSC data source and logic. Operationally, this dashboard enables users to go from a user-friendly aggregated visualization, down to the row-level data to further their investigation in any platform they please.

Purpose

Other reports in the XXXXXXXX-based suite of reports are listed below and included in this data definition document.

1. Exact name of report 1
2. Exact name of report 2
3. Exact name of report 3 etc

Dimension/Slicer Definitions (optional)

Measure Definitions

Additional Information

Primary Data Sources	<ul style="list-style-type: none">• VHSSC Consult Cube• CDWWork.Con.ConsultActivity
Update Frequency	Daily
Helpdesk	http://vaww.vssc.med.va.gov/troubleshooter/default.aspx?ramplID=4912
Link to VHSSC Website Location	
Power BI Server:	Server: vhauusbi25.vha.med.va.gov\as2 Database: VHSSC_Access_ClinicUtilization

[http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx
?/Performance+Reports/Measure+Management/Measure&Measure=3781&Year=2023&rs:Command=Render](http://pm.rtp.med.va.gov/ReportServer/Pages/ReportViewer.aspx?/Performance+Reports/Measure+Management/Measure&Measure=3781&Year=2023&rs:Command=Render)

Tuesday, February 4, 2025 8:16 AM