

# **Suicide High Risk Patient Enhancements (SHRPE)**

**IB\*2.0\*614**

## **Release Notes**



**Department of Veterans Affairs**

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**Version 3.0**

## Revision History

Date	Version	Description	Author
09/12/2018	4.0	Monthly Review, No Updates	Shavkat Shamukhamedov
08/23/2018	3.0	Added information to the section 4.2; Made corrections in the section 4.1.	Umamaheswari Karthikeyan, Shavkat Shamukhamedov
07/06/2018	2.0	Updated for Build 3, Sprint 2	Debbie Worth
04/16/2018	1.0	Initial document	Shavkat Shamukhamedov, Debbie Worth

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# 1. Introduction

This modification enhances the ability of the Department of Veterans Affairs (VA) to alleviate financial and emotional stressors of patients who are flagged as being at High Risk for Suicide (HRfS).

## 2. Purpose

These release notes cover the changes to the Integrated Billing (IB) application made by IB\*2.0\*614.

## 3. Audience

This document targets users and administrators of the IB application and applies to the changes made between this release and any previous release for this software.

## 4. This Release

The following sections provide a summary of the new features and functions added.

### 4.1. New Features and Functions Added

The following are the new features and functions added to Integrated Billing by IB\*2.0\*614:

- Modifications to prevent Outpatient visit copayment charges from being created/charged for patients with the national HRfS flag active on the date of service.
- Modifications to the menu option IB CANCEL/EDIT/ADD CHARGES to prevent Outpatient visit copayment charges from being added manually for patients with the national HRfS flag active on the date of service.
- Modifications to prorate Rx copay amounts paid by patients with the national HRfS flag active on the date of service if the supply is for less than 30 days.
- The modification to the menu option IB CANCEL/EDIT/ADD CHARGES for the manual process of adding Rx charges to support prorated amounts for Rx copays:
  - Added the prompt “Days’ Supply” if the Patient has the HRfS flag; if the supply is for less than 30 days, then prorate the cost.
- A new entry HRFS FLAGGED was added to IB CHARGE REMOVE REASONS file (#350.3) to support visit copay exemptions for patients with the national HRfS flag active on the date of service.
- A new post-install routine ^IB20P614 to add the new entry HRFS FLAGGED to the IB CHARGE REMOVE REASON file (#350.3).

### 4.2. Enhancements and Modifications to Existing

- Modifications in ^IBAMTS3 for preventing manual charges Outpatient visit copayments and to prorate RX amounts for HRfS patients.
- Created a new entry in file IB CHARGE REMOVE REASONS (#350.3) – “HRFS Flagged”
- Modifications to ^IBARX1 to pro-rate the amount to charge the patient.
- Modifications to the routine ^IBECEAU2 (in UNIT section) to add the prompt for “Days’ Supply”

- New field is #70.02 SHRPE ACTIVATION DATE was added to the file #350.9 IB SITE PARAMETERS. This new field is used to activate functionality delivered by the patch. This field is not set to any specific date by this patch installation. It is set to null value which effectively turns off the functionality delivered by the patch. This is because the effective date for appropriate legislation (and funding) for this functionality is unknown at the time of the patch release.
- The second additional patch IB\*2.0\*269 will be released when the activation date is determined. This second patch will contain the installation code that will enter the effective date of legislation into the database, so the IB\*2.0\*614 code can read the activation date, compare it with the date of service and apply new business logic for billing accordingly. Until the second additional patch IB\*2.0\*269 is installed, the functionality of the patch IB\*2.0\*614 will stay dormant.
- Modifications to ^IBARX1 to check for HRfS flag and days' supply is less than 30 days,

### **4.3. Known Issues**

None at this time

## **5. Product Documentation**

- No project documentation relevant to these modifications has been published. Current documentation is found in the [Virtual Document Library \(VDL\)](#), at the time of this document's creation.