

CDR Handbook

A Guide for Preparing the
Cost Distribution Report



April 1996

CHAPTER 1

GENERAL

1.1 Introduction

a. The cost accounting system in the VA is designed to produce cost information on a functional or organizational level. However, management requires a further distribution to reflect the cost of patient care provided through the VA medical system. This information has, in the past, been used as backup data for budget support to the Congress and for developing interagency and tort reimbursement rates for inpatient and outpatient services furnished by the VA. The source of this patient care cost data is the RCS 10-0141, Cost Distribution Report (CDR).

b. Additional uses have been found for the RCS 10-0141 data, the most recent being as a cost base for Resource Allocation. The Resource Planning and Management (RPM) process is designed to fully integrate VHA planning, management, and budget. Although not yet fully implemented, RPM data is reflected in the Fiscal Year 1995 facility Target Allowance. When fully implemented, RPM will be used both in the facility Target Allowances and in the actual budget submission to OMB (Office of Management and Budget) and the Congress.

c. Each Service Chief is responsible for developing a percentage distribution of his/her service's costs. A service may have more than one cost center. Each Service Chief must make a conscientious effort to provide the most accurate distribution data possible for each cost center for which they have responsibility. Designated responsible officials should develop percentage distributions of time spent and all other costs pertinent to each bed section and outpatient care area. The official RCS 10-0141 Handbook is available from Fiscal Service at each medical center. The Handbook is composed of Chapter One which contains general instructions as well as account definitions, and cost center specific instructions in the remaining chapters. Additional guidance is available from the facility CDR Coordinator or the CDR Liaison Group via FORUM mail group G.CDRTS as well as VA [Headquarters] Program Officials.

Baseline reporting, where appropriate, is the recommended method for developing distribution percentages. A yearly sampling should be performed, with periodic reviews and adjustments to update program and staffing information if required throughout the fiscal year. The most accurate method for obtaining this information would be to make a name listing of each employee in the cost center and distribute his/her time actually spent in the various categories. The Bed Status Report (G&L) can be used as a guide, and would reflect any changes to correlate the

operating beds on the CDR. Refer to account definitions for the composition of other than VA inpatient categories. Personal Services cost, full-time employee equivalent (FTEE) and all other costs accumulated under Medical Care cost centers will be distributed to these categories. Direct charges are utilized wherever possible, particularly in the area of education and training. Data should be submitted to the CDR Coordinator in a timely manner and signed by the authorized official.

Guidelines which should be used in judging the appropriateness of the cost center/account combination are:

1. Only 200 series cost centers should be used with direct care distribution accounts.
2. Administration, the xxxx.30 accounts, is to be used only with the 400 series cost centers.
3. Environmental Management, the xxxx.40 accounts, is to be used only with the Environmental Management cost centers.
4. Engineering, the xxxx.50 accounts, is to be used only with the Engineering cost centers.
5. Instructional, the xxxx.12 accounts, and Administrative Support, the xxxx.13 accounts, are the instructional and administrative support of the VA Headquarters approved trainee programs. Any cost center which provides support in these areas can be used with these accounts.

Where appropriate, clinical reports may include FTEE and Personal Services distributions for the following CDR BOCs: RNs - 1061, Physicians - 1081, and Other Personnel - 0000; and All Other costs only for Scarce Medical - 2579, Incentive Therapy - 2582, House Staff - 2587, Blood - 2635, Prosthetic devices associated with surgical implants - 2692, and Other Non-Personnel costs - 0000. Both Clinical and Administrative cost centers may need to distribute FTEE and Personal Services for Trainees-1041, and All Other costs of Continuing Education Travel - 2103 in addition to their usual reporting. Other CDR BOCs used include: FEE Medical - 2561 (cc 363 only), FEE Dental - 2571 (cc 363 only), Contract Hospital (.01) - 2575, and Prescriptions - 2635 (cc 363 only). This information is represented on the Jurisdictional portion of the report. The CDR BOCs differ from the FMS BOCs in that some CDR BOCs represent more than one FMS BOC, or may be limited to specific cost centers. Additional guidance on the use of these BOCs is available from the facility CDR Coordinator.

d. PROCEDURES: The RCS 10-0141 Report is computer-generated monthly at the Austin Automation Center by linkage of PAID, FMS, AMIS, LOG1, and ISMS systems. The PAID system reveals man-hours and salary costs by cost center. Personnel transactions, timecards, pay adjustments and overtime records are source documents for PAID. The LOG1 system contains data on inventory and assets. The ISMS system, which will replace LOG1 under FMS, contains data on inventory for selected nonperishable, expendable goods. The FMS system reveals cost of supplies consumed, services utilized, assets, construction, petty cash and work-in-process. The FMS systems pass the cost and full-time equivalent employment (FTEE) data to the CDR system. The facility CDR Coordinator inputs cost distribution percentages for Section I and II accounts, as well as actual costs and FTEE (man-hours) for Section III Specialized Medical Services through on-line computer data entry. All data input via the system linkages is for the current month only; however, data input on-line may be for the current month or any prior month. The data is distributed on a monthly basis and accumulated to produce a fiscal year-to-date report.

The report is produced on the night of the fourteenth workday of each month and distributed on microfiche each month. The report is also available electronically on the fifteenth workday of each month. A paper copy of the report is published following the end of each calendar quarter.

e. COMPONENTS OF THE RCS 10-0141: The report consists of three sections: Section I - the distribution of supplies and personal service costs utilized during the report month to appropriate CDR accounts using information furnished by each service.

Section II - Education and Training Programs and Research Support. These costs are reported in Section I but are isolated in Section II to provide a detailed listing of each Program element by cost center.

Section III - Specialized Medical Services. These costs are also reported as percentage distributions to Section I accounts, but the actual costs are required to be computed and reported in Section III.

The report is sorted and printed by CDR account and by cost center. The sort by CDR account is generally referred to as the Detail report whereas the sort by cost center is the Jurisdictional report. The Detail report shows account data by cost center and is also available as a summary report showing only the account total level data. The Jurisdictional report includes BOC data and lists the CDR accounts to which the cost center was distributed. There is no summary report available for the Jurisdictional report.

1.2 Definitions

NOTE: *Additional definitions are contained in Appendix B - Glossary.*

a. COST CENTER: A functional or organizational level of responsibility used for classifying and accumulating costs, e.g., Medical Service, Surgical Service, Sanitation Operations. The 200 series of cost centers are assigned to direct medical care -- VA facilities; 300 series are assigned to contract and fee services; 400 series are assigned to administrative Services; 500 series are assigned to Engineering and Environmental Management, and 600 series are assigned to miscellaneous benefits. All costs are reported in FMS by cost center. It should be pointed out that cost centers are not synonymous with fund control points.

b. COSTS: The dollar amount of goods and services received and/or expended during the report month.

c. FMS: The VA accounting system which captures, on a cumulative basis, personal services and all other costs by cost center and BOC.

d. DISTRIBUTION CATEGORIES: These are specific categories in the RCS 10-0141 which are designed to measure the treatment cost of inpatient and outpatient care, both VA and non-VA. The distribution accounts identify the major categories of cost.

(1) Major Cost Categories:

<u>Category</u>	<u>Account Series</u>
Inpatient - VA	1000.00
Outpatient - VA	2000.00
Inpatient - Non-VA	3000.00
Outpatient - Non-VA	4000.00
Off-Facility Programs - VA	5000.00
Miscellaneous Benefits & Services	6000.00
Interstation Transfers	7000.00
Services Furnished Other Than VHA	8000.00

(2) Subdivisions of Inpatient - VA:

<u>Category</u>	<u>Account Series</u>
Medical Bed Section	1100.00
Surgical Bed Section	1200.00
Psychiatric Bed Section	1300.00
VA Nursing Home Care Bed Section	1400.00
Domiciliary Care Bed Section	1500.00
Intermediate Care Bed Section	1600.00
Psychiatric Residential Rehabilitation Treatment Program	1700.00

(3) Account Suffix Codes:

Unassigned	.00
Satellite Outpatient Clinics	.01
Community-Based Clinics	.02
Outreach & Mobile Outreach Clinics	.03
Education and Training	
Trainee Payroll (includes contract)	.11
Instructional Support - Trainees	.12
Administrative Support - Trainees	.13
Continuing Education	.14
Research Support	
Medical Research	.21
Prosthetic Research	.22
[Administration] Support	.30
[Environmental] Management Support	.40
Engineering Support	.50
Equipment Depreciation	.70
Building Depreciation	.80

e. DISTRIBUTION ACCOUNTS: The level to which costs are distributed on the RCS 10-0141. Definitions of the accounts are provided below. Accounts which have a suffix other than .00 will be grouped according to the suffix.

(1) INPATIENT - VA

General Comments: The VA inpatient accounts (i.e. 1000 account series) listed below should be utilized to distribute direct care costs incurred in the provision of all care (excluding dialysis, Open Heart Surgery, and

Operating/Recovery Room costs) for patients occupying a bed in an [] approved bed section. Having a specialty or service of treatment does not mean that a facility has an [] approved bed section. For example, although most VAMCs have a Physical Medicine & Rehabilitation Service, they may not necessarily have an [] approved designated Rehabilitation bed section. This distinction is important since costs should only be distributed to [] approved bed sections where the services were incurred or rendered (e.g. physician services, nursing services, dental services, ancillary services, consults, etc. should be charged to the bed section account where the patient is located). Refer to Accounts 1118.00 Inpatient Dialysis, 1212.00 Operating/Recovery Room, and 1213.00 Open Heart Surgery for guidance in distributing costs related to the provision of these types of care during an inpatient stay. Any questions regarding the appropriateness of distributing costs to these accounts should be referred to the Facility CDR Coordinator or the CDR Liaison Group via FORUM mail group G.CDRTS.

1110.00 General Medicine

All costs incurred in the examination, diagnosis, and treatment of diseases/disorders of inpatients admitted to a general medical bed section, including cardiology, gastroenterology, immunology, hematology, oncology, dermatology, endocrinology, infectious diseases, pulmonary diseases, etc. as well as the costs of other medical disorders. (Excludes the costs associated with those bed sections designated by accounts 1111.00 through 1120.00, 1610.00 and 1620.00)

[Workload units are patient days and are derived by subtracting the units for accounts 1117.00, 1120.00 and the units for the Acute Medicine GEM from AMIS Segment 336 field 11.]

1111.00 Neurology

All costs incurred in the examination, diagnosis, and treatment of diseases/disorders of inpatients admitted to the neurology bed section, including strokes, aphasia, multiple sclerosis, etc.

[Workload units are patient days and are derived by subtracting the units for accounts 1114.00 and the units for the Neurology GEM from AMIS Segment 337 field 11.]

1113.00 Rehabilitation [Medicine]

All costs incurred in the evaluation and treatment of diseases/disorders of inpatients admitted to the physical medicine rehabilitation bed section.

[Workload units are patient days and are derived by subtracting the units for the Rehabilitation GEM from the units reported on AMIS Segment 338 field 11.]

1114.00 Epilepsy Center

All costs incurred in the diagnosis, treatment, and medical intervention of inpatients admitted to an epilepsy bed section/center. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.]*

Workload units are patient days and are to be provided from local VAMC sources.]

1115.00 Blind Rehabilitation

All costs incurred in the diagnosis, treatment and medical intervention of inpatients admitted to a blind rehabilitation bed section, including the costs incurred in providing personal and social adjustment training/services to the blind in adapting to their environments. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.]*

Workload units are patient days and are derived from AMIS Segment 339 field 11.]

1116.00 Spinal Cord Injury

All costs incurred in the diagnosis, treatment, and medical intervention of inpatients admitted to a spinal cord injury bed section, including treatments/services such as intensive rehabilitation care, sustaining care, and long-term care. [This account also includes the cost of items such as wheelchairs, gurneys, beds, etc. which were ordered as part of the discharge planning for the SCI patient.]

Workload units are patient days and are derived by subtracting the units for account 1116.01 from AMIS Segment 340 field 11.]

1116.01 SCI Substance Abuse (Inpatient)

All costs incurred in the evaluation and treatment for substance abuse among spinal cord injury patients. *This account is [a pilot program and is] restricted to VAMC Bronx, NY.*

[Workload units are patient days and are to be provided from local VAMC sources.]

1117.00 Medical Intensive Care Units

All costs incurred for inpatients admitted to a medical and/or coronary intensive care unit as well as a general purpose intensive care unit. A general intensive care unit is defined as a unit using designated intensive care beds interchangeably for more than one type of patient (e.g. medical, coronary, surgical).

[Workload units are patient days and are to be provided from local VAMC sources.]

1118.00 Inpatient Dialysis

Includes all direct costs incurred for inpatient dialysis treatments associated with acute or chronic renal failure. The treatment counts are limited to one per day per patient; units are entered through on-line entry into Austin. Treatments include peritoneal dialysis, hemodialysis, and other extracorporeal treatments such as CAVH, SCUF, CVVH, SUF, and hemoperfusion. Does include all dialysis treatments for poisons/overdoses. Does not include therapeutic plasma exchange (plasmapheresis) treatments for non renal-related conditions.

[The Dialysis Unit is not a bed section. Patients are not admitted to the dialysis unit. Dialysis is a procedure that may be required during a patient's hospital admission. Only costs associated with services and supplies required to perform inpatient dialysis are to be distributed to account 1118.00.]

Direct costs for this account include all medications related to the dialysis treatment (i.e., saline, heparin, albumin) and other supplies issued to the dialysis unit. Does not include prescriptions/medications specifically issued to individual patients (i.e., vancomycin, EPO, TPN). Does not include laboratory cost for individual patients.

For example, a dialysis patient admitted for any condition will have the cost for inpatient care charged to the appropriate bed section (i.e., medical, surgical, psychiatric). However, the cost for dialysis treatments (i.e., dialysis staff, dialysis supplies) while an inpatient will be charged to this account.

Cost distribution to this account is limited to the following cost centers:

- 201 Medicine
- 211 Dialysis
- 221 Social Work
- 224 Pharmacy
- 241 Nursing Service
- 243 Dietetic
- 281 Supply Processing & Distribution
- 285 Ward Administration

[Workload units are dialysis treatments and are to be provided from local VAMC sources.]

1119.00 Inpatient AIDS

All costs incurred for inpatients admitted to an AIDS bed section. *This account is only applicable to New York, Miami, and West Los Angeles VAMCs.*

[Workload units are patient days and are to be provided from local VAMC sources.]

1120.00 Geriatric Evaluation and Management (GEM) Unit - Medical Beds

All costs incurred in the diagnosis, treatment, and medical intervention of GEM inpatients admitted to acute medicine, neurology and rehabilitation; patient treating specialty codes 31, 34 and 35.

[Workload units are patient days and are to be provided from local VAMC sources. It will be necessary to adjust the units for CDR accounts 1110.00, 1111.00, and 1113.00 to prevent duplicate reporting of days of care. The On-line Units screen will display accounts 1121.00, 1122.00, and 1123.00 in place of the GEM account 1120.00. Enter units for acute medicine GEM into account 1121.00; units for rehabilitation GEM into account 1122.00; and units for neurology GEM into account 1123.00.]

1130.00 Primary Care - Medicine

All costs incurred in the examination, diagnosis, and treatment of diseases / disorders of inpatients admitted to general medicine bed sections, including cardiology, gastroenterology, immunology, dermatology, endocrinology, infectious disease, pulmonary diseases, etc. as well as the costs of other medical disorders, if the admission is a result of or, in conjunction with outpatient Primary Care. *(Excludes the costs associated with those bed sections designated by accounts 1110.00 through 1120.00 and 1610.00.)* The PTF Code number related to this account is 23.

[Workload units are patient days and are to be provided from local VAMC sources.

Total direct care units are patient days and are the sum of units for accounts 1110.00, 1111.00, 1113.00, 1114.00, 1115.00, 1116.00, 1116.01, 1117.00, 1119.00, 1120.00, and 1130.00.

1100.11 Education & Training - Trainee Salary - Medical Beds

1100.12 Education & Training - Instructional Support - Medical Beds

1100.13 Education & Training - Administrative Support - Medical Beds

1100.14 Education & Training - Continuing Education - Medical Beds

See definitions for Education and Training following definition for account 8000.80.

1100.21 Medical Research Support - Medical Beds

1100.22 Prosthetic Research Support - Medical Beds

See definitions for Research Support following definition for account 8025.00.

1100.30 Administration Support - Medical Beds

All administrative and clerical costs incurred in the management and operation of the Medical Beds activity. Use of this account is limited to the 400 series cost centers.

1100.40 Environmental Management Support - Medical Beds

All costs of the environmental management services provided to the Medical Beds activity.

1100.50 Engineering Support - Medical Beds

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs of the medical function.

1100.70 Equipment Depreciation - Medical Beds

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Medical Beds activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

1100.80 Building Depreciation - Medical Beds

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Medical Beds activity.

Workload units for accounts 1100.11 through 1100.80 are patient days and are the total of units for accounts 1110.00, 1111.00, 1113.00, 1114.00, 1115.00, 1116.00, 1116.01, 1117.00, 1119.00, 1120.00, and 1130.00]

1210.00 Surgical Ward Cost

All costs incurred in the examination, diagnosis and treatment of diseases/disorders of inpatients admitted to a surgical bed section, including general surgery, urology, orthopedics, vascular, neurosurgery, plastic, thoracic, transplantation, etc.

[Workload units are patient days and are derived by subtracting the units for accounts 1211.00 and 1230.00 from AMIS Segment 341 field 11.]

1211.00 Surgical Intensive Care Unit

All costs incurred for inpatients admitted to an approved and designated surgical intensive care unit. (Excludes the costs incurred for surgical

patients admitted/transferred to a general purpose unit - refer to account 1117.00)

[Workload units are patient days and are derived from AMIS Segment J42 field 8.]

1212.00 Operating/Recovery Room

All costs incurred in the operative treatment of disease, performed in the operating room as well as the costs provided to patients in the recovery room. (Excludes the costs of pre/post operative treatment and services provided on a general ward, as well as the operating/recovery room costs incurred for procedures involving open heart surgery.) Also excludes the cost of ambulatory procedures performed in the operating room. [*This account is for reporting inpatient workload only.*]

Workload equates to one unit per patient procedure in the Operating Room and is to be provided from local VAMC Surgical sources.]

1213.00 Open Heart Surgery

All direct care costs incurred in the operating room and the recovery room for open heart surgical procedures. (Excludes the costs of pre/post operative treatment and service provided on a general ward, as well as the operating/recovery room costs incurred for procedures other than open heart surgery and cardiac catheterization.) *Only inpatient cost and workload are to be reported to this account.*

[Workload equates to one unit per inpatient open heart procedure in the Operating Room and is to be provided from local VAMC Surgical sources.]

1230.00 Primary Care - Surgery

All costs incurred in the examination, diagnosis and treatment of diseases / disorders of inpatients admitted to a surgical bed section, including general surgery, urology, orthopedics, vascular, neurosurgery, plastic, thoracic, transplantation, etc. if the admission is a result of or, in conjunction with outpatient Primary Care. (*Excludes the costs associated with accounts 1210.00 through 1213.00.*) The PTF Code number related to this account is 64.

[Workload units are patient days and are to be provided from local VAMC sources.

Total direct care units are patient days and are the sum of units for accounts 1210.00, 1211.00, and 1230.00.

1200.11 Education & Training - Trainee Salary - Surgical Beds

1200.12 Education & Training - Instructional Support - Surgical Beds

1200.13 Education & Training - Administrative Support - Surgical Beds

1200.14 Education & Training - Continuing Education - Surgical Beds

See definitions for Education and Training following definition for account 8000.80.

1200.21 Medical Research Support - Surgical Beds

1200.22 Prosthetic Research Support - Surgical Beds

See definitions for Research Support following definition for account 8025.00.

1200.30 Administration Support - Surgical Beds

All administrative and clerical costs incurred in the management and operation of the Surgical Beds activity. Use of this account is limited to the 400 series cost centers.

1200.40 Environmental Management Support - Surgical Beds

All costs of the environmental management services provided to the Surgical Beds activity.

1200.50 Engineering Support - Surgical Beds

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs of the medical function.

1200.70 Equipment Depreciation - Surgical Beds

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Surgical Beds activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

1200.80 Building Depreciation - Surgical Beds

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Surgical Beds activity.

Workload units for accounts 1200.11 through 1200.80 are patient days and are the total of units for accounts 1210.00, 1211.00, and 1230.00]

PSYCHIATRIC INPATIENT

Psychiatric inpatient programs are in the 1300 and 1700 series of CDR accounts. Facilities are not expected to have all programs or to use all psychiatric CDR accounts. Facilities providing differing levels of care on one unit (e.g. Substance Abuse and PTSD) that are not "formalized programs" should use the 1310.00 account. For costs to be assigned to other CDR accounts in the 1300 and 1700 series, the facility must have a program with designated beds on the station's G & L, along with written admissions/treatment/discharge policies and procedures. This requirement also applies to those accounts which can be accomplished at "local discretion". Additional information on Mental Health and Behavioral Sciences Service programs is provided in M-2, Part X.

1310.00 High Intensity General Psychiatric Inpatient Unit

All direct care costs incurred in the diagnosis and treatment of diseases/disorders for patients admitted to a high intensity psychiatry inpatient unit with workload not reported elsewhere in the Psychiatric inpatient accounts.

[Workload units are patient days and are derived by subtracting the units for accounts 1311.00, 1312.00, 1313.00, 1314.00, 1315.00, 1316.00, 1317.00,

1320.00, 1330.00, 1711.00, 1712.00, 1713.00, 1714.00 and 1715.00 from AMIS Segment 334 fields 11 + 12.]

1311.00 General Intermediate Psychiatry

All direct care costs incurred in the care, treatment and support of inpatients in locally designated subacute psychiatry beds other than substance abuse. The length of stay is expected to be under 90 days.

[Workload units are patient days and are to be provided from local VAMC sources.]

1312.00 Substance Abuse Intermediate Care

All direct care costs incurred in the care, treatment and support of inpatients in a locally designated subacute substance abuse psychiatry bed. The length of stay is expected to be under 90 days.

[Workload units are patient days and are to be provided from local VAMC sources.]

1313.00 Substance Abuse Treatment Program - High Intensity

All direct care costs incurred in the diagnosis and treatment of patients admitted to a [] (reporting on an inpatient substance abuse AMIS segment) drug, alcohol, or combined alcohol and drug treatment unit. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.]*

[Workload units are patient days and are derived for AMIS Segment 311 field 20 + AMIS Segment 314 field 20 + AMIS Segment 315 field 15.]

1314.00 Specialized Inpatient PTSD Unit (SIPU) - Intermediate Care

All direct care costs incurred in a SIPU which provides comprehensive treatment for PTSD. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.]*

Workload units are patient days and are to be provided from local VAMC sources.]

1315.00 Evaluation/Brief Treatment PTSD Unit (EBTPU) - High Intensity

All direct care costs incurred in a [] EBTPU unit providing short-term inpatient PTSD care. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.]*

Workload units are patient days and are to be provided from local VAMC sources.]

1316.00 STAR I, II, & III Programs Sustained Treatment and Rehabilitation

All direct care costs incurred in the care, treatment and support of inpatients in a locally designated sustained treatment and rehabilitation psychiatric bed, other than substance abuse. The length of stay is usually greater than 90 days.

[Workload units are patient days and are to be provided from local VAMC sources.]

1317.00 Substance Abuse STAR I, II, & III Programs Sustained Treatment and Rehabilitation

All direct care costs incurred in the care, treatment and support of inpatients in a locally designated substance abuse sustained treatment and rehabilitation psychiatric bed. These programs will usually involve patients with significant psychiatric and/or medical comorbidities. The length of stay is usually greater than 90 days.

[Workload units are patient days and are to be provided from local VAMC sources.]

1320.00 Geriatric Evaluation and Management (GEM) Unit - Psychiatry Beds

All costs incurred in the diagnosis, treatment, and medical intervention of GEM inpatients admitted to psychiatry; patient treating specialty code 33.

[Workload units are patient days and are to be provided from local VAMC sources.]

1330.00 Primary Care - Psychiatric

All costs incurred in the examination, diagnosis and treatment of diseases / disorders of inpatients admitted to a psychiatric bed section. *(Excludes the*

costs associated with accounts 1310.00 through 1320.00.) The PTF Code number related to this account is 78.

[Workload units are patient days and are to be provided from local VAMC sources.

Total direct care units are patient days and are the sum of units for accounts 1310.00, 1311.00, 1312.00, 1313.00, 1314.00, 1315.00, 1316.00, 1317.00, 1320.00 and 1330.00.

1300.11 Education & Training - Trainee Salary - Psychiatric Beds

1300.12 Education & Training - Instructional Support - Psychiatric Beds

1300.13 Education & Training - Administrative Support - Psychiatric Beds

1300.14 Education & Training - Continuing Education - Psychiatric Beds

See definitions for Education and Training following definition for account 8000.80.

1300.21 Medical Research Support - Psychiatric Beds

1300.22 Prosthetic Research Support - Psychiatric Beds

See definitions for Research Support following definition for account 8025.00.

1300.30 Administration Support - Psychiatric Beds

All administrative and clerical costs incurred in the management and operation of the Psychiatric Beds activity. Use of this account is limited to the 400 series cost centers.

1300.40 Environmental Management Support - Psychiatric Beds

All costs of the environmental management services provided to the Psychiatric Beds activity.

1300.50 Engineering Support - Psychiatric Beds

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes

all utilities and ancillary engineering services to support the program needs of the medical function.

1300.70 Equipment Depreciation - Psychiatric Beds

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Psychiatric Beds activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

1300.80 Building Depreciation - Psychiatric Beds

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Psychiatric Beds activity.

Workload units for accounts 1300.11 through 1300.80 are patient days and are the total of units for accounts 1310.00, 1311.00, 1312.00, 1313.00, 1314.00, 1315.00, 1316.00, 1317.00, 1320.00 and 1330.00]

1410.00 VA Nursing Home Care

All costs incurred in the care and treatment of inpatients in VA nursing home care units.

[Workload units are patient days and are derived by subtracting units for account 1420.00 from AMIS Segment 345 field 15 .]

1420.00 Geriatric Evaluation and Management (GEM) Unit - VA Nursing Home

All costs incurred in the diagnosis, treatment, and medical intervention of GEM inpatients admitted to VA nursing home care; patient treating specialty code 81.

[Workload units are patient days and are to be provided from local VAMC sources.

Total direct care units are patient days and are the sum of units for accounts 1410.00 and 1420.00.

1400.11 Education & Training - Trainee Salary - VA Nursing Home Beds

1400.12 Education & Training - Instructional Support - VA Nursing Home Beds

1400.13 Education & Training - Administrative Support - VA Nursing Home Beds

1400.14 Education & Training - Continuing Education - VA Nursing Home Beds

See definitions for Education and Training following definition for account 8000.80.

1400.21 Medical Research Support - VA Nursing Home Beds

1400.22 Prosthetic Research Support - VA Nursing Home Beds

See definitions for Research Support following definition for account 8025.00.

1400.30 Administration Support - VA Nursing Home Beds

All administrative and clerical costs incurred in the management and operation of the Nursing Home Beds activity. Use of this account is limited to the 400 series cost centers.

1400.40 Environmental Management Support - VA Nursing Home Beds

All costs of the environmental management services provided to the Nursing Home Beds activity.

1400.50 Engineering Support - VA Nursing Home Beds

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs of the medical function.

1400.70 Equipment Depreciation - VA Nursing Home Beds

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Nursing Home Beds activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

1400.80 Building Depreciation - VA Nursing Home Beds

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Nursing Home Beds activity.

Workload units for accounts 1400.11 through 1400.80 are patient days and are the total of units for accounts 1410.00 and 1420.00]

1510.00 Domiciliary Bed Section

All costs incurred in the general care and treatment of inpatients in VA domiciliaries. Costs of special programs for Domiciliary patients will be reported to the appropriate 1511.00 or 1512.00 account. Cost of care provided to Domiciliary patients in an outpatient setting will be charged to the appropriate Ambulatory Care distribution account. All domiciliary patient days will be included as work units for this account. Total work units for the Domiciliary account section will be the units for this account.

[Workload units are patient days and are derived from AMIS Segment 346 field 15 .]

1511.00 Domiciliary Substance Abuse

A [] Domiciliary program providing substance abuse treatment and rehabilitation on a designated number of Domiciliary beds. Only substance abuse treatment costs provided by enhancement moneys or staffing enhancements provided locally should be costed to this account. The patient days will be included in CDR account 1510.00 as domiciliary days and also reported in 1511.00. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.]*

Workload units are patient days and are derived from AMIS Segment 346 field 15 .]

1512.00 Domiciliary - PTSD

A [] Domiciliary program providing PTSD treatment and rehabilitation on a designated number of Domiciliary beds. Only PTSD services rendered by enhancement staff or local staffing enhancements should be costed to this account. The patient days will be included in CDR account 1510.00 as domiciliary days and also reported in 1511.00. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.*

Workload units are patient days and are to be provided from local VAMC sources.]

1520.00 Geriatric Evaluation and Management (GEM) Unit - Domiciliary

All costs incurred in the diagnosis, treatment, and medical intervention of GEM inpatients admitted to the domiciliary; patient treating specialty code 87.

[Workload units are patient days and are to be provided from local VAMC sources.

Total direct care units are patient days and are the units for account 1510.00.

1500.11 Education & Training - Trainee Salary - Domiciliary Beds

1500.12 Education & Training - Instructional Support - Domiciliary Beds

1500.13 Education & Training - Administrative Support - Domiciliary Beds

1500.14 Education & Training - Continuing Education - Domiciliary Beds

See definitions for Education and Training following definition for account 8000.80.

1500.21 Medical Research Support - Domiciliary Beds

1500.22 Prosthetic Research Support - Domiciliary Beds

See definitions for Research Support following definition for account 8025.00.

1500.30 Administration Support - Domiciliary Beds

All administrative and clerical costs incurred in the management and operation of the Domiciliary Beds activity. Use of this account is limited to the 400 series cost centers.

1500.40 Environmental Management Support - Domiciliary Beds

All costs of the environmental management services provided to the Domiciliary Beds activity.

1500.50 Engineering Support - Domiciliary Beds

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs of the medical function.

1500.70 Equipment Depreciation - Domiciliary Beds

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Domiciliary Beds activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

1500.80 Building Depreciation - Domiciliary Beds

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Domiciliary Beds activity.

Workload units for accounts 1500.11 through 1500.80 are patient days and are the units for account 1510.00.]

1610.00 Intermediate Care

All direct care costs incurred in the care, treatment, and support of inpatients in [] approved intermediate medicine beds.

[Workload units are patient days and are derived by subtracting units for account 1620.00 from AMIS Segment 335 field 11 .]

1620.00 Geriatric Evaluation and Management (GEM) Unit - Intermediate Care

All costs incurred in the diagnosis, treatment, and medical intervention of GEM inpatients admitted to intermediate care; patient treating specialty code 32.

[Workload units are patient days and are to be provided from local VAMC sources.

Total direct care units are patient days and are the sum of units for account 1610.00 and 1620.00.

1600.11 Education & Training - Trainee Salary - Intermediate Care Beds

1600.12 Education & Training - Instructional Support - Intermediate Care Beds

1600.13 Education & Training - Administrative Support - Intermediate Care Beds

1600.14 Education & Training - Continuing Education - Intermediate Care Beds

See definitions for Education and Training following definition for account 8000.80.

1600.21 Medical Research Support - Intermediate Care Beds

1600.22 Prosthetic Research Support - Intermediate Care Beds

See definitions for Research Support following definition for account 8025.00.

1600.30 Administration Support - Intermediate Care Beds

All administrative and clerical costs incurred in the management and operation of the Intermediate Care Beds activity. Use of this account is limited to the 400 series cost centers.

1600.40 Environmental Management Support - Intermediate Care Beds

All costs of the environmental management services provided to the Intermediate Care Beds activity.

1600.50 Engineering Support - Intermediate Care Beds

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs of the medical function.

1600.70 Equipment Depreciation - Intermediate Care Beds

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Intermediate Care Beds activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

1600.80 Building Depreciation - Intermediate Care Beds

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Intermediate Care Beds activity.

Workload units for accounts 1600.11 through 1600.80 are patient days and are the total of units for accounts 1610.00 and 1620.00.]

1711.00 PRRTTP (Psychiatric Residential Rehabilitation Treatment Program)

A [] PRRTTP not otherwise listed below. If more than one type of PRRTTP bed exist in the same unit, all costs should be costed to 1711.00. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.*

Workload units are patient days and are to be provided from local VAMC sources.]

1712.00 PRRP (PTSD Residential Rehabilitation Program)

A [] PR RTP focusing on the treatment and rehabilitation of PTSD patients. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.]*

Workload units are patient days and are to be provided from local VAMC sources.]

1713.00 SAR RTP (Substance Abuse Residential Rehabilitation Treatment Prog.)

A [] PR RTP focusing on the treatment and rehabilitation of substance abuse patients. *[Please contact the appropriate Headquarters clinical program office prior to using this account for the first time.]*

Workload units are patient days and are to be provided from local VAMC sources.]

1714.00 HCM I CWT/TR (Homeless Chronically Mentally Ill Compensated Work Therapy/Transitional Residences)

A [] PR RTP focusing on patients suffering from homelessness and chronic mental illness. All services provided, including CWT, must be costed to this account. *[This account is to be used for VACO approved HCM I CWT/TR programs only.]*

Workload units are patient days and are to be provided from local VAMC sources.]

1715.00 SA CWT/TR (Substance Abuse Compensated Work Therapy/Transitional Residences)

A [] PR RTP focusing on patients with substance abuse problems. All services provided, including CWT, must be costed to this account. *[This account is to be used for VACO approved SA CWT/TR programs only.]*

Workload units are patient days and are to be provided from local VAMC sources.

Total direct care units are patient days and are the sum of units for accounts 1711.00, 1712.00, 1713.00, 1714.00 and 1715.00.

1700.11 Education & Training - Trainee Salary - Psychiatric Residential Rehabilitation Beds

1700.12 Education & Training - Instructional Support - Psychiatric Residential Rehabilitation Beds

1700.13 Education & Training - Administrative Support - Psychiatric Residential Rehabilitation Beds

1700.14 Education & Training - Continuing Education - Psychiatric Residential Rehabilitation Beds

See definitions for Education and Training following definition for account 8000.80.

1700.21 Medical Research Support - Psychiatric Residential Rehabilitation Beds

1700.22 Prosthetic Research Support - Psychiatric Residential Rehabilitation Beds

See definitions for Research Support following definition for account 8025.00.

1700.30 Administration Support - Psychiatric Residential Rehabilitation Beds

All administrative and clerical costs incurred in the management and operation of the Psychiatric Residential Rehabilitation Beds activity. Use of this account is limited to the 400 series cost centers.

1700.40 Environmental Management Support - Psychiatric Residential Rehabilitation Beds

All costs of the environmental management services provided to the Psychiatric Residential Rehabilitation Beds activity.

1700.50 Engineering Support - Psychiatric Residential Rehabilitation Beds

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs of the medical function.

1700.70 Equipment Depreciation - Psychiatric Residential Rehabilitation Beds

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Psychiatric Residential Rehabilitation Beds activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

1700.80 Building Depreciation - Psychiatric Residential Rehabilitation Beds

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Psychiatric Residential Rehabilitation Beds activity.

Workload units for accounts 1700.11 through 1700.80 are patient days and are the total of units for accounts 1711.00, 1712.00, 1713.00, 1714.00 and 1715.00.]

(2) OUTPATIENT - VA

General Comments: The distribution accounts listed below should be utilized to report direct costs associated with outpatient care provided at VA facilities (.00); VA satellite outpatient clinics (.01); VA community-based clinics (.02); outreach and mobile outreach clinics (.03). With the exception of Domiciliary patients, a facility cannot receive workload credit for any inpatient care provided in an outpatient setting); therefore, costs should be charged to the appropriate bed section. Any questions concerning the appropriateness of distributing costs to these accounts should be referred to the Facility CDR Coordinator or the CDR Liaison Group via FORUM mail group G.CDRTS.

[Distribution to the Outpatient CDR accounts must be based on the activity occurring in the clinics covered by the CDR account. For example, the majority of the Prosthetic outpatient activity will occur in the prosthetic clinics 417, 418 and 423; therefore, the majority of cost center 270 outpatient FTEE and costs should be in CDR account 2614.00. Cost center 270 is appropriate for other Outpatient accounts only when Prosthetic Service provides their services as part of the other clinics. If a medical clinic refers a patient to the Prosthetic/Orthotics clinic, stop 417, cost center 270 should not distribute FTEE and cost to CDR account 2110.00 because of the referral. However, if Prosthetics Service is called to General Surgery, stop 401, for a

consult, then it would be appropriate to distribute cost center 270 FTEE and cost to CDR account 2210.00.]

2110.00 Medicine
2110.01 Medicine - SOC
2110.02 Medicine - CBC
2110.03 Medicine - ORC

The cost of diagnostic and/or therapeutic care related to general medicine and provided in the clinic stops listed below. (Excludes the costs incurred for ambulatory special procedures which are reported in account 2211.00.)

301 - General Internal Medicine
302 - Allergy Immunology
303 - Cardiology
304 - Dermatology
305 - Endocrinology/Metabolic
306 - Diabetes
307 - Gastroenterology
308 - Hematology
309 - Hypertension
310 - Infectious Disease
311 - Pacemaker
312 - Pulmonary/Chest
313 - Renal/Nephrology
314 - Rheumatology/Arthritis
315 - Neurology
316 - Oncology/Tumor
317 - Coumadin Clinic
318 - Geriatric Clinic
319 - Geriatric Evaluation & Management (GEM) Clinic
320 - Alzheimer's/Dementia Clinic
321 - GI Endoscopy
322 - Women's Clinic
[328 - Medical Day Unit MSDU
330 - Chemotherapy Procedures Unit - Medicine
331 - Pre-Bed Care MD (Medicine)
332 - Pre-Bed Care RN (Medicine)

Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

2111.00 Admitting/Screening
2111.01 Admitting/Screening - SOC
2111.02 Admitting/Screening - CBC
2111.03 Admitting/Screening - ORC

All costs incurred in the admitting and/or screening of patients. Includes the following clinic stops:

101 - Emergency Unit
102 - Admitting/Screening

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

2130.00 Outpatient Primary Care - Medicine
2130.01 Outpatient Primary Care - Medicine - SOC
2130.02 Outpatient Primary Care - Medicine - CBC
2130.03 Outpatient Primary Care - Medicine - ORC

All costs of diagnostic and therapeutic care related to general medicine and provided in the clinic listed below.

323 - Primary Care / Medicine

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinic.]

2210.00 Surgery
2210.01 Surgery - SOC
2210.02 Surgery - CBC
2210.03 Surgery - ORC

The cost of diagnostic and/or therapeutic care related to surgical outpatients and provided in the clinics listed below.

[329 - Ambulatory Care Procedures Unit]
401 - General Surgery
402 - Cardiac Surgery
403 - ENT
404 - Gynecology
405 - Hand Surgery
406 - Neurosurgery

407 - Ophthalmology
408 - Optometry
409 - Orthopedics
410 - Plastic Surgery
411 - Podiatry
412 - Proctology
413 - Thoracic Surgery
414 - Urology
415 - Vascular Surgery
416 - Ambulatory Surgery Office
419 - Anesthesia Pre-Op Consult
420 - Pain Clinic
421 - Vascular Laboratory
422 - Cast Clinic
426 - Women Surgery
[431 - Chemotherapy Procedures Unit - Surgery
432 - Pre-Bed Care MD (Surgery)
433 - Pre-Bed Care RN (Surgery)

Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

[2211.00 Ambulatory Operating Room
2211.01 Ambulatory Operating Room - SOC
2211.02 Ambulatory Operating Room - CBC

All direct costs related to the operation of ambulatory operating rooms associated with the following clinics:

327 - Medicine Physician Performing Invasive OR Procedure
429 - Ambulatory Care or OR Surgery Outpatient Surgery Room
430 - Cysto Room Unit for Outpatient

Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

2230.00 Outpatient Primary Care - Surgery
2230.01 Outpatient Primary Care - Surgery - SOC
2230.02 Outpatient Primary Care - Surgery - CBC
2230.03 Outpatient Primary Care - Surgery - ORC

All costs of diagnostic and therapeutic care related to surgery and provided in the clinic listed below.

427 - Primary Care / Surgery

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinic.]

- 2310.00 Special Psychiatry
- 2310.01 Special Psychiatry - SOC
- 2310.02 Special Psychiatry - CBC
- 2310.03 Special Psychiatry - ORC

The cost of diagnostic and/or therapeutic care related to special psychiatric outpatient activity and provided in the clinic stops listed below.

- 516 - PTSD - Group
- 521 - Long-Term Enhancement - Group
- 550 - Mental Health Clinic - Group
- 553 - Day Treatment - Group
- 554 - Day Hospital - Group
- 557 - Psychiatry - Group
- 558 - Psychology - Group
- 573 - Incentive Therapy
- 574 - Compensated Work Therapy
- 575 - Vocational Assistance
- [577 - Psychogeriatric Clinic - Group

Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

- 2311.00 General Psychiatry
- 2311.01 General Psychiatry - SOC
- 2311.02 General Psychiatry - CBC
- 2311.03 General Psychiatry - ORC

The cost of diagnostic and/or therapeutic care related to general psychiatric outpatient activity and provided in the clinic stops listed below.

- 502 - Mental Health Clinic - Individual
- 505 - Day Treatment - Individual
- 506 - Day Hospital - Individual
- 509 - Psychiatry - Individual
- 510 - Psychology - Individual
- 512 - Psychiatry Consultation

- 515 - CWT/TR-HCMI
- 520 - Long-Term Enhancement - Individual
- 524 - Sexual Trauma Counseling - Women Veterans
- 525 - Women's Stress Disorder Treatment Teams
- 529 - HCHV/HMI
- 562 - PTSD - Individual
- [576 - Psychogeriatric Clinic - Individual
- 578 - Psychogeriatric Day Program

Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

- 2313.00 PTSD Clinical Team
- 2313.01 PTSD Clinical Team - SOC
- 2313.02 PTSD Clinical Team - CBC
- 2313.03 PTSD Clinical Team - ORC

[]Includes all direct care costs associated with a facility's post traumatic stress disorder clinical care provided in the following clinic:

- 540 - PCT-Post Traumatic Stress

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinic.]

- 2316.00 Substance Abuse Dependence - OP
- 2316.01 Substance Abuse Dependence - OP - SOC
- 2316.02 Substance Abuse Dependence - OP - CBC
- 2316.03 Substance Abuse Dependence - OP - ORC

All direct care costs associated with an outpatient substance abuse program. All Services providing care in the following clinics should distribute FTEE and costs to this account.

- 507 - Drug Dependence - Individual
- 508 - Alcohol Treatment - Individual
- 513 - Substance Abuse - Individual
- 514 - Substance Abuse - Home Visit
- 517 - CWT/Substance Abuse
- 518 - CWT/TR - Substance Abuse
- 522 - HUD-VASH
- 523 - Methadone Maintenance
- 555 - Drug Dependence - Group

556 - Alcohol Treatment - Group
560 - Substance Abuse - Group

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

2317.00 Substance Abuse Disorder (SUPS)
2317.01 Substance Abuse Disorder (SUPS) - SOC
2317.02 Substance Abuse Disorder (SUPS) - CBC
2317.03 Substance Abuse Disorder (SUPS) - ORC

Includes the cost of diagnostic and/or therapeutic care related to substance abuse disorder and provided by a PTSD Team in the following clinic stop:

519 - Substance Use Disorder/PTSD Teams

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinic.]

2330.00 Outpatient Primary Care - Special Psychiatric Treatment
2330.01 Outpatient Primary Care - Special Psychiatric Treatment - SOC
2330.02 Outpatient Primary Care - Special Psychiatric Treatment - CBC
2330.03 Outpatient Primary Care - Special Psychiatric Treatment - ORC

All costs of diagnostic and therapeutic care related to special psychiatric outpatient activity and provided in the clinic listed below.

563 - Primary Care / Spec. Psych

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinic.]

2331.00 Outpatient Primary Care - General Psychiatric Treatment
2331.01 Outpatient Primary Care - General Psychiatric Treatment - SOC
2331.02 Outpatient Primary Care - General Psychiatric Treatment - CBC
2331.03 Outpatient Primary Care - General Psychiatric Treatment - ORC

All costs of diagnostic and therapeutic care related to general psychiatric outpatient activity and provided in the clinic listed below.

531 - Primary Care / General Psych

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinic.]

2410.00 Dialysis
2410.01 Dialysis - SOC

Includes all direct costs of outpatient dialysis treatments for the clinic stops listed below:

- 602 - Chronic Assisted Hemodialysis Treatment
- 603 - Limited Self Care Hemodialysis Treatment
- 604 - Home/Self Hemodialysis Training Treatment
- 606 - Chronic Assisted Peritoneal Dialysis
- 607 - Limited Self Care Peritoneal Dialysis
- 608 - Home/Self Peritoneal Dialysis Training

The treatment counts will be one for each hemodialysis treatment and one for each day of dialysis for peritoneal dialysis. Exclude the costs of dialysis treatment for inpatients (reported to CDR account 1118.00.)

Direct costs for this account include dialysis staff, all medications related to the dialysis treatment (i.e., saline, lidocaine, heparin) and supplies issued to the dialysis unit. Does not include prescriptions/medications specifically issued to individual patients (these costs reported in the CDR account 2613.00 series). Includes dialysis-related, patient-specific, laboratory costs and other laboratory costs for the unit (i.e., bacteriologic test on water).

Cost distribution to this account is limited to the following cost centers:

- 201 - Medicine
- 211 - Dialysis
- 221 - Social Work
- 223 - Laboratory
- 224 - Pharmacy
- 241 - Nursing Service
- 243 - Dietetic
- 281 - Supply Processing & Distribution
- 285 - Ward Administration
- 286 - Ambulatory Care Administration

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

2510.00 Adult Day Health Care
2510.01 Adult Day Health Care - SOC
2510.02 Adult Day Health Care - CBC
2510.03 Adult Day Health Care - ORC

All direct costs associated with the VA staff care and treatment of the Adult Day Health Care (ADHC) patients and provided in the following clinic:

190 - Adult Day Health Care

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinic.]

2610.00 Ancillary Services
2610.01 Ancillary Services - SOC
2610.02 Ancillary Services - CBC
2610.03 Ancillary Services - ORC

The cost of ancillary services in support of diagnosis and/or treatment of outpatients provided in the following clinic stops:

117 - Nursing
120 - Health Screening
122 - Public Health Nursing
123 - Nutrition/Dietetics/Individual
124 - Nutrition/Dietetics/Group
125 - Social Work Service
160 - Clinical Pharmacy
165 - Bereavement Counseling
166 - Chaplain Service - Individual
167 - Chaplain Service - Group
168 - Chaplain Service - Collateral
999 - Employee Health

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

2611.00 Rehabilitative and Supportive Services
2611.01 Rehabilitative and Supportive Services - SOC
2611.02 Rehabilitative and Supportive Services - CBC
2611.03 Rehabilitative and Supportive Services - ORC

The cost of rehabilitation services in support of the diagnosis and/or treatment of outpatients provided in the following clinic stops:

- 201 - Physical Medicine & Rehabilitation Service
- 202 - Recreation Therapy Service
- 203 - Audiology
- 204 - Speech Pathology
- 205 - Physical Therapy
- 206 - Occupational Therapy
- 207 - PM&RS Incentive Therapy
- 208 - PM&RS Compensated Work Therapy
- 209 - VIST Coordinator
- 210 - Spinal Cord Injury
- 211 - Amputation Follow-Up Clinic
- 212 - EMG - Electromyogram
- 213 - PM&RS Vocational Assistance
- 214 - Kinesiotherapy

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

- 2612.00 Diagnostic Services
- 2612.01 Diagnostic Services - SOC
- 2612.02 Diagnostic Services - CBC
- 2612.03 Diagnostic Services - ORC

The cost of diagnostic services in support of the diagnosis and/or treatment of outpatients provided in the following clinic stops:

- 104 - Pulmonary Function
- 105 - X-Ray
- 106 - EEG
- 107 - EKG
- 108 - Laboratory
- 109 - Nuclear Medicine
- 115 - Ultrasound
- 126 - Evoked Potential
- 127 - Topographical Brain Mapping
- 128 - Prolonged Video EEG Monitoring
- 144 - Radionuclide Therapy
- 145 - Pharmacology/Physiologic Nuclear Myocardial Perfusion Studies
- 146 - PET
- [149 - Radiation Therapy Treatment

- 150 - Computerized Tomography (CT)
- 151 - Magnetic Resonance Imaging (MRI)
- 152 - Angiogram Catheterization
- 153 - Interventional Radiography

Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

- 2613.00 Pharmacy
- 2613.01 Pharmacy - SOC
- 2613.02 Pharmacy - CBC
- 2613.03 Pharmacy - ORC

The costs of pharmacy services incurred in the diagnosis and/or treatment of outpatients (*Excludes the costs of staff/FTEE assigned to a clinical pharmacy outpatient clinic--clinic stop 160 which is reported to account 2610.00*)

[Workload units are the number of prescriptions filled and are derived from AMIS Segment 157 fields 1 + 2 + 3 + 4 - 6.]

- 2614.00 Prosthetics/Orthotics
- 2614.01 Prosthetics/Orthotics - SOC
- 2614.02 Prosthetics/Orthotics - CBC
- 2614.03 Prosthetics/Orthotics - ORC

The cost of prosthetic/orthotic services in support of the diagnosis and/or treatment of outpatients provided in the following clinic stops:

- 417 - Prosthetic/Orthotics
- 418 - Amputation Clinic
- 423 - Prosthetic Services

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.]

- 2616.00 SCI Substance Abuse (Outpatient)

All costs incurred in the evaluation and treatment for substance abuse among spinal cord injury patients. *This account is restricted to VAMC Bronx, NY.*

[Workload units are clinic stops and are to be provided from local VAMC sources.]

2710.00 Dental Procedures
2710.01 Dental Procedures - SOC

The total costs of all outpatient examination and treatment procedures (other than those procedures which produce a CPT code) performed by Dental staff. For CDR purposes the units are CTVs from the DAS 270 report. Dental visits are captured in stop code 180 and telephone dental in stop code 181. The stop count, instead of the CTVs, is used in the total outpatient units.

[Workload units are CTVs and are derived from the DAS 270 Report .]

2750.00 Domiciliary Aftercare - VA

The total costs of all visits of discharged domiciliary patients to a VA domiciliary follow-up clinic for care as part of a domiciliary discharge plan.

Includes the following clinic stop:

727 - Domiciliary Aftercare - VA

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinic.]

2780.00 Telephone Contacts

Includes all direct costs associated with telephone consultation between the patient and the VA clinical / professional staff regarding case management, advice, referral, etc. for the following clinic stops:

103 - Telephone / Triage
147 - Telephone / Ancillary
148 - Telephone / Diagnostic
169 - Telephone / Chaplain
178 - HBHC / Telephone
181 - Telephone / Dental
216 - Telephone / Rehab & Support
324 - Telephone / Medicine
325 - Telephone / Neurology
326 - Telephone / Geriatrics
424 - Telephone / Surgery
425 - Telephone / Prosthetics/Orthotics

[428 - Telephone / Optometry]
526 - Telephone / Special Psychiatry
527 - Telephone / General - Psychiatry
528 - Telephone / Homeless Mentally Ill
530 - Telephone / HUD - VASH
542 - Telephone / PTSD
546 - Telephone / IPCC
[579 - Telephone / Geriatric Psychiatry]
611 - Telephone / Dialysis
729 - Telephone / Domiciliary

[Workload units are clinic stops and are derived from the Ambulatory Care System for the above clinics.

Total direct care units are clinic stops and are the sum of clinic stops reported on the COIN OPS.

2800.11 Education & Training - Trainee Salary - Outpatient

2800.12 Education & Training - Instructional Support - Outpatient

2800.13 Education & Training - Administrative Support - Outpatient

2800.14 Education & Training - Continuing Education - Outpatient

See definitions for Education and Training following definition for account 8000.80.

2800.21 Medical Research Support - Outpatient

2800.22 Prosthetic Research Support - Outpatient

See definitions for Research Support following definition for account 8025.00.

2800.30 Administration Support - Outpatient

All administrative and clerical costs incurred in the management and operation of the Outpatient activity. Use of this account is limited to the 400 series cost centers.

2800.40 Environmental Management Support - Outpatient

All costs of the environmental management services provided to the Outpatient activity.

2800.50 Engineering Support - Outpatient

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs of the medical function.

2800.70 Equipment Depreciation - Outpatient

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Outpatient activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

2800.80 Building Depreciation - Outpatient

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Outpatient activity.

Workload units for accounts 2800.11 through 2800.80 are clinic stops and are the sum of clinic stops reported on the COIN OPS.]

(3) INPATIENT - NON-VHA

General Comments: The accounts listed below should be utilized to report the costs of non-VA inpatient activity in which no RPM reportable workload is generated/received by the VA facility. Because these services are provided in non-VA facilities, there should be minimal direct care (i.e. 200 cost centers) costs associated or reported to these accounts. Provided below are a few examples of inclusions/exclusions of direct care costs which can and cannot be distributed to these accounts. Any questions concerning the appropriateness of distributing costs to these accounts should be referred to the Facility CDR Coordinator or the CDR Liaison Group via FORUM mail group G.CDRTS.

Inclusions:

- visits made by VA staff to the non-VA facility to review the patient's condition, treatment, or arrange further placement
- [clinical] review of the patient's bill as part of contract/fee program evaluation
- visits made by VA staff to inspect, negotiate, etc. non-VA facilities and services

Exclusions:

- any activity or service performed in which the patient is an active inpatient at a VA facility (i.e. includes such services and functions as discharge planning coordinating, arranging, scheduling placement/transfer to a non-VA facility; telephone contacts with staff at non-VA facilities; review of medical information pertinent to treatment and services received at non-VA facilities; etc.)

3110.00 Contract Hospital - Medical

All [] charges paid for medical (i.e., cardiology, dermatology, metabolic, infectious diseases, pulmonary, etc.) and other non-surgical inpatient care received by veterans at non-VA hospitals.

[Workload units are patient days and are derived from AMIS segment 344 field 8 plus segment 347 field 8 plus segment 348 field 8.]

3210.00 Contract Hospital - Surgical

All [] charges paid for surgical inpatient care (i.e., ENT, gynecologic, ophthalmologic, orthopedic, proctologic, urologic, surgical, etc.) received by veterans at non-VA hospitals.

[Workload units are patient days and are derived from AMIS segment 344 field 18 plus segment 347 field 18 plus segment 348 field 18.]

3310.00 Contract Hospital - Psychiatric

All [] charges paid for psychiatric inpatient care received by veterans at non-VA hospitals.

[Workload units are patient days and are derived from AMIS segment 344 field 28 plus segment 347 field 28 plus segment 348 field 28.]

3410.00 Community Nursing Home Care

All costs incurred in the care and treatment of patients in contract community nursing homes. Also includes the costs of follow-up visits by VA staff for clinic stop 119 - Community Nursing Home Follow-up. Cost center 342 - Nursing Home Care -Community Homes - should distribute 100% to this account.

[Workload units are patient days and are derived from AMIS segment 349 field 15.]

3411.00 State Home Nursing Home Care

All costs incurred in the care of patients in state home nursing homes. Cost Center 341 - Nursing Home Care - State Homes - should distribute 100% to this account.

[Workload units are patient days and are derived from AMIS segment 350 field 18.]

3510.00 State Domiciliary Home Care

All costs incurred in the care of patients in state home domiciliaries. Cost Center 331 - Domiciliary Care - State Homes -should distribute 100% to this account.

[Workload units are patient days and are derived from AMIS segment 350 field 9.]

3520.00 Contract Homeless Chronically Mentally Ill

Includes all direct care staff and contract costs associated with the contract HCMI program. []

[Workload units are patient days and are to be furnished by the program coordinator.]

3521.00 Contract Alcohol and Drug Treatment and Rehabilitation

Includes all direct care staff and contract costs associated with the Alcohol and Drug Contract Residential Treatment Program (Contract Halfway House) Cost center 361 - Alcohol and Drug Treatment and Rehabilitation - should distribute 100% to this account.

[Workload units are patient days and are to be furnished by the program coordinator.]

3610.00 State Home Hospital Care

All costs incurred in the care of patients in state home hospitals.

Cost Center 332 - Hospital Care - State Homes - should distribute 100% to this account.

[Workload units are patient days and are derived from AMIS segment 350 field 27.]

3611.00 Civilian Health and Medical Program (CHAMPVA)

All costs paid by the VA to non-VA institutions for inpatient care provided to VA beneficiaries under the CHAMPVA program.

[Workload units are patient days and are to be furnished by the program coordinator.]

Total direct cost units are patient days and are the sum of units for accounts 3110.00, 3210.00, 3310.00, 3410.00, 3411.00, 3510.00, 3521.00, 3610.00, and 3611.00.

3800.30 Administration Support - Inpatient Non-VA

All administrative and clerical costs incurred in the management and operation of the inpatient non-VA activities.

3800.40 Environmental Management Support - Inpatient Non-VA

All costs of the environmental management services provided to the inpatient non-VA activities.

3800.50 Engineering Support - Inpatient Non-VA

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts.

3800.70 Equipment Depreciation - Inpatient Non-VA

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Inpatient Non-VA activities. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

3800.80 Building Depreciation - Inpatient Non-VA

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Inpatient Non-VA activity.

Workload units for accounts 3800.30 through 3800.80 are the same as the units for total direct cost.】

(4) OUTPATIENT - NON-VA

General Comments: The accounts listed below should be utilized to report the costs of non-VA outpatient activity in which no RPM reportable workload

is generated/received by the VA facility. Because these services are provided in non-VA facilities, there should be minimal direct care (i.e. 200 cost centers) costs associated or reported to these accounts. Two exceptions are account 4111.00 Other Non-VA Outpatient Care which may have substantial radiation therapy charges and account 4613.00 Fee Tests Performed by VA Laboratories which covers services provided in VA facilities. Provided below are a few examples of inclusions/exclusions of direct care costs which can and cannot be distributed to these accounts. Any questions concerning the appropriateness of distributing costs to these accounts should be referred to the Facility CDR Coordinator or the CDR Liaison Group via FORUM mail group G.CDRTS.

Inclusions:

- visits made by VA staff to the non-VA facility to review the patient's condition, treatment, or arrange further placement
- costs of contract special services such as radiation therapy, chemotherapy, CAT scans, ambulatory surgery services, blood/blood products trans., nuclear magnetic resonance
- [clinical] review of the patient's medical status/bill as part of contract/fee program evaluation
- visits made by VA staff to inspect, negotiate, etc. non-VA facilities and services

Exclusions:

- review of medical information pertinent to treatment and services received at non-VA facilities which is relevant to a patient's visit to an outpatient VA clinic
- cost of fee or contract tests which are incident to the treatment of the patient for which outpatient workload credit is taken

4110.00 Outpatient Care - Fee Medical

All [] charges paid for outpatient fee medical services provided to veterans at non-VA facilities. Cost center 363 (2561) - Outpatient Fee-Basis Medical and Nursing Services - should be distributed 100% to this account.

[Workload units are the number of visits which are derived from AMIS segment 228 fields 2, 5, 8, 11, 14, 17, 20 and 23. This segment is created at the Austin Automation Center based on data provided from the Fee system.]

4111.00 Other Non-VA Outpatient Care

The cost of outpatient services purchased on a contract/fee service basis when the care or service cannot be provided by the VA facility. These services should not generate any reportable RPM workload. This account also includes the costs of various outpatient services not appropriate for distribution to any of the other 4000 series accounts. Examples of expenditures appropriate for distribution to this account include:

- Home Oxygen
- ID Card Prosthetic Repair and Replacements
- Contract/Fee for Service Procedures (CAT Scans, Chemotherapy, Radiation Therapy, etc.)
- Non-VA Posthospital/Outpatient Care for Contract Inpatients (Cost Center 351 - Posthospital Care - should distribute 100% to this account)

[There are no workload units for this account.]

4112.00 Contract Adult Day Health Care

Includes all direct care staff and contract costs associated with the Contract Adult Day Health Care Program.

[Workload units are the number of visits and are to be furnished by the program coordinator.]

4120.00 Contract Dialysis

All [] charges paid for contract dialysis and related medical services provided to veteran patients.

[Workload units are the number of dialysis treatments and are derived from AMIS segment J19 field 61 plus field 62.]

4130.00 Fee Prescriptions Filled by VA Pharmacies

The cost of new and refills of patient prescriptions written by off-station, non-VA physicians which are dispensed by VA pharmacies. Includes prescriptions for non-formulary items dispensed by VA pharmacies.

[Workload units are the number of prescriptions filled and are derived from AMIS segment 157 field 6.]

4610.00 CHAMPVA - OP

All costs paid by the VA to non-VA institutions for outpatient medical care provided to VA beneficiaries under the CHAMPVA program.

[Workload units are the number of visits and are to be provided by the program coordinator.]

4612.00 Non-VA Pharmacies

All costs of authorized prescriptions written by off-station, non-VA physicians for drugs, medications and other medical requisites and tests which are dispensed by non-VA pharmacies directly to the patient. Cost center 363 (2636) - Outpatient Fee Prescriptions - should distribute 100% to this account. Pharmacy time used to review the billings for these prescriptions is appropriate for distribution to this account.

[Workload units are the number of prescriptions filled and are derived from AMIS segment 157 field 17.]

4613.00 Fee Tests Performed by VA Laboratories

The cost of diagnostic tests requested by off-station, non-VA physicians and performed in VA laboratories.

[Workload units are the number of test performed and are to be provided by the program coordinator.]

4710.00 Dental Services - Fee

The actual dollars expended for payment of fee-basis dental examinations and treatment services performed in non-VA facilities during the reporting period. Cost center 363 (2571) - Outpatient Fee Dental Service should be distributed 100% to this account. Dental time used to review the billings for these services is appropriate for distribution to this account.

[There are no workload units for this account.

There are no workload units for total direct cost due to the mixture of workload unit types for the 4000 series of accounts. Ignore the units and unit cost which appear on the report.

4800.30 Administration Support - Outpatient Non-VA

All administrative and clerical costs incurred in the management and operation of the outpatient fee activity. Does not include scheduling or coordinating a patient's visit to a non-VA provider that is done as part of the patient's discharge.

4800.40 Environmental Management Support - Outpatient Non-VA

All costs of the environmental management services provided to the outpatient fee activities.

4800.50 Engineering Support - Outpatient Non-VA

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs.

4800.70 Equipment Depreciation - Outpatient Non-VA

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the Outpatient Non-VA activity. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

4800.80 Building Depreciation - Outpatient Non-VA

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the Outpatient Non-VA activity.

There are no workload units for accounts 4800.30 through 4800.80 due to the mixture of workload unit types for the 4000 series of accounts. Ignore the units and unit cost which appear on the report.]

(5) OFF-FACILITY PROGRAMS - VA

General Comments: The accounts listed below should be utilized to distribute costs associated with Hospital Based Home Care as well as other various types of home based programs. It should be noted that accounts 5110.00 - Hospital Based Home Care and 5111.00 - Home Dialysis are restricted to VACO approved programs only; however, the other 5000 series accounts may be utilized to distribute costs incurred in these areas as appropriate.

5110.00 Hospital Based Home Care

All direct care cost (200 series cost centers) of care and treatment furnished the Hospital Based Home Care (HBHC) patient in the home setting, plus the HBHC coordinators and secretary time required to administer the program. Clinic stop 170 - HBHC records staff visits to the patient at their residence. However, for CDR purposes, the units are bed days of care and are reported through the Austin HBHC program.

NOTE: The 5000 series of accounts contains two each of the .30, .40 and .50 accounts. Indirect costs associated with the HBHC program are to be distributed to the 5110.30, 5110.40, and 5110.50 accounts rather than the 5000.30, 5000.40, or 5000.50 accounts where other home programs' indirect cost are reported.

[Workload units are patient days and are derived from the HBHC data system.

5110.30 Administration Support - Hospital Based Home Care

All administrative and clerical costs incurred in the management and operation of the HBHC activity. Does not include scheduling or coordinating a patient's visit to a VA or non-VA provider.

5110.40 Environmental Management Support - Hospital Based Home Care

All costs of the environmental management services provided to the HBHC activities.

5110.50 Engineering Support - Hospital Based Home Care

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the HBHC activity. Also includes all utilities and ancillary engineering services to support the program needs of the function.

The workload units for accounts 5110.30 through 5110.50 are the same as for account 5110.00.]

5111.00 Home Dialysis

All costs incurred in the home treatment of patients requiring removal of toxic wastes from patients with diseases of the kidneys, or acute poisonings or other toxic or metabolic diseases.

[The workload units are the number of dialysis performed and are derived from AMIS Seg. J19 fields 53 plus 54.]

5112.00 Spinal Cord Injury Home Care

Includes all costs of direct patient care provided in the SCI patients home under the authority of the Spinal Cord Injury Home Care Program. Excludes all cost of care provided the patient as an inpatient or in the outpatient clinics. Also excludes the costs of wheelchairs, special beds, etc. ordered as part of the discharge planning process for an inpatient (chargeable to 1116.00 Spinal Cord Injury) or as the result of an outpatient clinic visit (account 2611.xx Rehabilitative and Supportive Services or 2614.xx Prosthetics/Orthotics).

[The workload units are patient days and are derived from AMIS Seg. 363 fields 6 + 7 + 8 + 9.]

5113.00 Residential Care Home Program

Includes all authorized patient care expenses incurred by the VA for patients in the Residential Care Home Program. Does not include the expense of the patient staying in the home or the care provided at the VA facility or through any of the fee programs. [Staff visits in the community are recorded under clinic stops 121 - Residential Care Home Program and 503 - Residential Care

- Individual; however, patient days of care are the reported workload units for CDR purposes.

Workload units are patient days and are derived from local sources.]

5114.00 Other Home Based Programs

All costs of direct patient care provided in a patient's home setting for a home program not specifically identified by another account. Example: the Independent Living Program. No units are reported due to the mixture of programs. []

5115.00 Community Based Domiciliary Aftercare/Outreach

All costs relating to case-finding/contact services to homeless veterans and all costs of direct patient care provided to discharged domiciliary patients in the community as part of a domiciliary discharge plan. Includes the following clinic stops:

- 725 - Domiciliary Outreach Services
- 726 - Domiciliary Aftercare - Community

[Workload units are clinic stops for the above clinics.]

5116.00 Homemaker/Home Health Aide Program

The costs of purchased homemaker/home health aide services provides in the patient's home. [Cost Center 343 should be distributed 100% to this account.

Workload units are homemaker / aide visits to the patient's residence and are derived from local sources.]

5117.00 Intensive Psychiatric Community Care []

All costs of direct patient care provided by Intensive Psychiatric Community Care (IPCC) programs (specialized interdisciplinary teams to maintain severely psychiatrically disabled veterans in the community). Only VA medical facilities approved to participate in the IPCC program may use this account. Care may be provided at the medical center, a community clinic day program or in other community sources and localities.

The workload units for this account are the following clinic stops.

- 504 - IPCC Medical Center Visit

551 - IPCC Community Clinic/Day Program Visit
552 - IPCC Community Visit

There are no workload units for total direct cost due to the mixture of workload unit types for the 5000 series of accounts. Ignore the units and unit cost which appear on the report.

5000.30 Administration Support - Off-Facility VA Programs

All administrative and clerical costs incurred in the management and operation of the off-facility programs.

5000.40 Environmental Management Support - Off-Facility VA Programs

All costs of the environmental management services provided to the off-facility programs.

5000.50 Engineering Support - Off-Facility VA Programs

Engineering support includes all costs of recurring and non-recurring maintenance and repair to real and personal property utilized by the functional units associated with their respective CDR accounts. Also includes all utilities and ancillary engineering services to support the program needs.

5000.70 Equipment Depreciation - Off-Facility VA Programs

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the off-facility programs. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

5000.80 Building Depreciation - Off-Facility VA Programs

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the off-facility programs

There are no workload units for accounts 5000.30 through 5000.80 due to the mixture of workload unit types for the 5000 series of accounts. Ignore the units and unit cost which appear on the report.]

(6) MISCELLANEOUS BENEFITS AND SERVICES

General Comments: Costs distributed to the miscellaneous accounts (i.e. 6000/7000/8000) are restricted solely for direct and indirect care costs associated with the programs and services listed in the CDR account definitions. Costs reported/distributed to these accounts should not generate any reportable workload for resource allocation purposes. Any questions pertaining to the utilization of these accounts should be referred to the Facility CDR Coordinator or the CDR Liaison Group via FORUM mail group G.CDRTS.

Exclusion List: An exclusion list of services and activities felt to be inappropriate for distribution to the miscellaneous and non-VHA accounts is provided below. The costs associated with these activities are considered to be a part of a facility's overhead cost of doing business and should be distributed to the appropriate 1000-2000 CDR accounts. The list is not intended to be all inclusive but rather to serve as a reference for clarifying and identifying certain activities inappropriate for distribution to these accounts. Therefore, the omission of an activity from the following list does not necessarily indicate that cost distribution to these accounts is appropriate.

- Projects, studies, reports, etc. applicable to the operation of the facility (i.e. AMIS, Questionnaires, Pre/Post survey reports, Region required reports, etc.)
- JCAHO, External Peer Review Process (EPRP), IG, and other surveys/audits/reviews
- Preparation and attendance of meetings relevant to the operation of the facility (i.e. all facility committee meetings, Regional Planning Board meetings, TQI/QA meetings, Education meetings, etc.)
- Blood drives, food drives, bond campaigns, CFC, Federal Women's Program, or other such activities
- Community services/activities (i.e. working with local schools, organizations, etc.)
- Time spent in support of VA Regional Offices (i.e. eligibility, means test, C&P exams, processing of correspondence requests, etc.)
- Attendance at workshops, seminars, or other training programs
- sick leave pending retirement, sabbatical leave, military leave, court leave, etc.
- Time associated with Relocation Expense Program
- On station EEO investigation
- Time in support of Tumor Registry
- Time and costs associated with Employee Health, Employee Assistance, Employee Wellness programs

- Bereavement counseling and the attending of funeral/memorial services of patients
- Other activities associated with care of dead (i.e. autopsies, transcription services, medical media, etc.)
- Coordination/administrative processing of patient transfers and records to both VA and non-VA facilities
- Responding/answering congressional Inquiries
- Time spent with visitors, dignitaries, etc.
- Costs and time in support of affiliations (i.e. attending meetings, training of students etc.)
- Gratuitous meals, meal tickets, etc. for volunteers, WOC trainees, etc.
- Support to non-VA libraries (i.e. ILL and local consortium)

[There are no workload units for the 6000 series CDR accounts.]

Account Definitions:

6010.00 Other Miscellaneous Benefits and Services

Includes direct and indirect costs associated with the following miscellaneous services and activities. *(Note: where referenced, the cost center listed after the program/activity should distribute 100% of their costs to this account; however, this does not preclude other cost centers in support of these activities/programs from utilizing this account.)*

- Home Improvement & Structural Alterations - Cost Center 601
- Beneficiary Travel - Cost Center 602
- Care of Dead - Cost Center 603 only
- Operation & Maintenance of Cemeteries - Cost Center 604 only
- Housekeeping Quarters - Cost Center 621
- Non Housekeeping Quarters - Cost Center 622
- Garages & Parking Facilities - Cost Center 623
- Insurance Claims & Indemnities - Cost Center 631
- Canteen Services - Cost Center 632
- Readjustment Counseling Program (Off-Station)
- Repair of Equipment in a Veteran's home (i.e. only in support of HISA program, includes both VA/contract support)

6011.00 Regional/National Support

Includes direct and indirect costs incurred by VAMC in support of regional and national programs and offices. Examples of regional support include the current region offices as well as those on a level of the current regional division offices, networks and the former medical district offices. At a minimum, VAMCs with a regional office should distribute the FTEE and salaries of assigned staff to this account. (Note: *where referenced, the cost center listed after the program should distribute 100% of their costs to this account; however, this does not preclude other cost centers in support of these activities/programs from utilizing this account.*)

- Prosthetic Distribution Center - Cost Center 265
- Regional Information systems Center (ISCs) - Cost Center 610
- Administrative Programs - Cost Center 615
- Regional Directors Office - Cost Center 651
- District Directors Office - Cost Center 655

Also includes costs incurred in support of:

- Visual Impairment Services Team (VIST) program where no reportable workload is generated
- EEO investigations performed off station (i.e. includes pre/post administrative review relevant to the investigation)
- Reviews/Audits/Investigations performed by medical center staff off station at the request of District, Region, and/or VACO (i.e. EPRP reviewer, special program investigations, etc.)
- Special task force/committee appointments by the Region and/or VACO which are not considered a part of the facility's operations (i.e. Technical Advisory Groups, CMD's Field Advisory Committee, Data Validation Task Force, CDR Task Force, etc.)
- Time of staff serving as a chairperson for any Regional and/or VACO meeting; however, only the costs and time that are a direct result of the chairperson's duties and responsibilities (i.e. scheduling/coordination of meetings, preparing agendas and minutes, coordinating and arranging meeting accommodations, etc.)
- VACO approved special projects and/or alpha-beta test sites for costs incurred above the normal cost of doing business

6013.00 Continuing Education and Training Programs

Includes the direct and indirect costs associated with or incurred in the support of the following continuing education and training programs. (Note: *where referenced, the cost centers listed after the program should distribute*

100% of their costs to this account; however, this does not preclude other cost centers in support of these activities/programs from utilizing this account, such as faculty participation or host VAMC support cost.)

- Operation of Regional Medical Education Centers - Cost Center 605
- Regional Police Training Centers - Cost Center 606
- Learning Resources Center - Cost Center 607
- Cooperative Health Manpower Education Programs
- Dental Education Centers
- Engineering Training Centers

As referenced in the exclusion list, the costs of travel, tuition, and time of staff for attendance at one of the above programs should not be reported under this account. These costs should be reported to the .14-continuing education suffix account for the appropriate 1000/2000 CDR account.

6015.00 National Center on PTSD

Includes the direct and indirect costs incurred in support of the National Center on PTSD. (Applicable only to VACO approved facilities.)

[6000.70 Equipment Depreciation - Miscellaneous Benefits and Services

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the miscellaneous benefits and services programs. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

6000.80 Building Depreciation - Miscellaneous Benefits and Services

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the miscellaneous benefits and services programs.]

(7) INTERSTATION TRANSFERS

The 7000 accounts listed below are interstation transfer balancing accounts for the costs and FTEE incurred by a VAMC on behalf of another medical

center. Distribution of costs to this account must be supported by the issuance of VA Form 4-4573, Interstation Cost Transfer, by the servicing station

[There are no workload units for the 7000 series of CDR accounts.]

7000.10 Direct Care Services

This is an interstation transfer balancing account for direct care costs and FTEE incurred in the provision of direct care activities and services on the behalf of another medical center in which there was no transfer of the patient and no workload generated for resource allocation purposes, and/or reimbursement received for the services provided. Examples of services appropriate for cost transfer include but are not limited to:

- General Reference Labs
- Central Dental Labs
- Consolidated Mail-Out Pharmaceuticals
- Medical Media support
- Provision of clinical services by loan or rotation (both recurring and nonrecurring), such as staff which rotate to other facilities (e.g., a Chaplain who rotates to other centers to provide Chaplain support)
- Dietetic Services performed for another station

7000.30 [Administration] Services

Includes all costs of administrative services (i.e. Supply Services, Medical Administration Services, etc.), except for those listed below, which are performed for another VAMC.

7000.40 [Environmental Management Services]

Includes all costs of services performed for another VAMC by laundry and linen activities.

7000.50 Engineering Service

Includes the costs of services performed for another VAMC by Engineering Service.

(8) SERVICES FURNISHED TO OTHER THAN VHA

General Comments: The 8000 series accounts listed below have been established to report the costs of services incurred in support of non-VHA activities. Refer to the general comments and exclusion list, referenced under the miscellaneous benefits and services accounts, for services and activities inappropriate for distribution to these accounts. Any questions concerning the utilization of these accounts should be referred to the Facility CDR Coordinator or the CDR Liaison Group via FORUM mail group G.CDRTS

8021.00 Services Furnished to Veterans Benefits Admin. (VBA)

This includes administrative, environmental management, and engineering support to field VBA activities. (Excludes the costs of services for C&P exams, veteran service organizations, employee health--refer to exclusion list). Facilities should locally input work units for this account.

[Workload units are the number of cumulative FTEE on-board at the supported VBA activity through the report period and are derived from local sources. Units should be entered once each year. If the FTEE changes significantly during the year, enter the incremental change only.]

8022.00 Services to the National Cemetery System (NCS)

This includes administrative, environmental management, and engineering support to field NCS activities. It does not include the cost of employee health services which should be reported in account 2610.00, Ancillary Services.

[Workload units are the number of National Cemeteries serviced and are derived from local sources. Units should be entered once each year. If the number of cemeteries changes during the year, enter the incremental change only.]

8023.00 Services to Other Non-VHA Activities

This includes the support provided other VA and non-VA elements not represented elsewhere. It does not include support costs to Veterans Canteen Service activities which should be distributed to CDR account 6010.00.

There are no work units for account 8023.00.

8024.00 DoD Sharing

This includes the cost of services furnished to DoD under formal sharing agreements pursuant to 38 USC 5011. Services for patients who are entered into the PTF, OPC, and RUGII databases are not included. However, it does include services for lab tests and similar work for which no patient entries to PTF, etc. result.

[Workload units are the amount of funds billed (not necessarily collected) to DoD for services rendered during the current fiscal year and are derived from local sources. Units should be entered for the monthly non-cumulative amount of billings.]

8025.00 Other Sharing

This includes the cost of services furnished to other Federal and non-Federal institutions under the authority of 38 USC 5053 or 5054. It also includes the cost of joint venture agreements completed under the authority of 38 USC. Services for patients who are entered into the PTF, OPC, and RUGII databases are not included.

[Workload units are the amount of funds billed (not necessarily collected) to non-DoD sharing partners for services rendered during the current fiscal year and are derived from local sources. Units should be entered for the monthly non-cumulative amount of billings.]

8000.70 Equipment Depreciation - Services Furnished to Other Than VHA

Equipment depreciation is a reasonable allowance for the exhaustion, wear and tear, and obsolescence of the equipment used in the performance of or to support the miscellaneous benefits and services programs. The computation and distribution of this depreciation will be accomplished through an interface with the LOG system.

8000.80 Building Depreciation - Services Furnished to Other Than VHA

Building depreciation is a reasonable allowance for the wear and tear of that portion of the physical plant used by or in support of the services furnished other than VHA.]

(9) EDUCATION AND TRAINING

Education and Training has four parts: Trainee salary, Instructional costs, Administrative Support, and Continuing Education.

____.11 Trainee Salary: The salary cost of the Headquarters approved .26 Trainees, or the contract cost of Headquarters approved staff contracts.

____.12 Instructional: The salary and other costs of the VA staff that are the instructors for the trainees who make up the Trainee Salary cost plus any WOC trainee of Headquarters approved training programs. Contractual services of consultants and lecturers who teach classes for the trainees will also be charged to this account.

____.13 Administrative Support: Refers to the same Headquarters approved training programs covered by Trainee Salary and Instructional Cost and includes such support as personnel actions, payroll, books, uniforms, coordination of the program, etc.

____.14 Continuing Education: All costs of travel, tuition, registration, contracts and supplies associated with provision of continuing education to VA staff. Includes the time and supplies used by VA staff to prepare and present a formal class, i.e., an activity where there is a teacher/student relationship. On-the-job training and periodic orientation of new personnel do not qualify as continuing education for RCS 10-0141 purposes, *nor does the time of the employee attending the formal classroom presentation.*

(10) RESEARCH SUPPORT

____.21 Medical Research Support

____.22 Prosthetic Research Support

Research support is that cost the Medical Care appropriation incurs in support of the Research program. Personnel who spend part of their VA time working on a research project are usually on the Medical Care rolls. If these employees use a portion of their normal duty tour to work on a research project, the cost of that time should be reported as Research Support. Patients may be research subjects and therefore some of the services provided the patient may be required only because of the research project. Administrative support such as personnel, fiscal, supply, maintenance and repair, etc. are provided to the Research program. The cost of this time, supplies, and services should be charged on the RCS 10-0141 as Research Support.

Research projects may be funded by the Research appropriation, through grants such as NIH, through the General Post Fund, or unfunded. Unfunded does not necessarily mean that the project has no funding. Headquarters approves projects as funded, partially funded or unfunded. For the unfunded project to be active the R&E committee must fund the project from available funds either by reducing the funding provided projects identified as fully funded or partially funded projects or through savings accrued from funded projects. Another form of unfunded projects is one which requires no funding other than some administrative support like duplication and tabulation of survey forms

After identifying the research projects and the investigators, it is necessary to accurately allocate the investigators time to research support. An investigator on the Medical Care rolls has as their first responsibility the care of the patients. Therefore, a full time physician working 90 hours during the pay period and spending 30 of these hours on a research project would show only 25% of his time as research support rather than 33 1/3%. The reason being that FTEE is calculated on a basis of 80 hours per pay period regardless of how much time is actually worked. The difference between the hours the employee should work and the hours spent in patient care, if due to research, will determine the percentage for research support.

[]

(11) SECTION III ACCOUNTS

Section III is a breakout of costs associated with the following special interest programs. The cost of these programs was also distributed to the Sections I accounts as bed section or clinic cost. Distribution to these accounts requires

separate and additional input to that which was provided for the Section I CDR accounts.

9010.00 Inpatient - HIV/ARC/AIDS
9011.00 Outpatient - HIV/ARC/AIDS
9020.00 Transplants
9030.00 Mental Hygiene Clinic
9031.00 Day Hospital
9032.00 Day Treatment Center
9051.00 Electron Microscopy Unit
9053.00 Supervoltage Therapy

[]

APPENDIX A

CDR CHART OF ACCOUNTS

SECTION I:

MEDICAL BED SECTION

- 1110.00 General Medicine
- 1111.00 Neurology
- 1113.00 Rehabilitation [Medicine]
- 1114.00 Epilepsy Center []
- 1115.00 Blind Rehabilitation []
- 1116.00 Spinal Cord Injury
- 1116.01 SCI Substance Abuse (*only applicable to VAMC Bronx*)
- 1117.00 Medical Intensive Care Units
- 1118.00 Inpatient Dialysis
- 1119.00 Inpatient AIDS (*only applicable to New York, Miami, and West Los Angeles VAMCs*)
- 1120.00 Geriatric Evaluation and Management (GEM) Unit - Medical Beds
- 1130.00 Primary Care - Medicine
- 1100.11 Education & Training - Trainee Salary[- Medical Beds]
- 1100.12 Education & Training - Instructional Support[- Medical Beds]
- 1100.13 Education & Training - Administrative Support[- Medical Beds]
- 1100.14 Education & Training - Continuing Education[- Medical Beds]
- 1100.21 [Medical] Research Support - Medical [Beds]
- 1100.22 [Prosthetic] Research Support - [Medical Beds]
- 1100.30 Administration [Support - Medical Beds]
- 1100.40 Environmental Management [Support - Medical Beds]
- 1100.50 Engineering [Support - Medical Beds]
- 1100.70 Equipment Depreciation[- Medical Beds]
- 1100.80 Building Depreciation[- Medical Beds]

SURGICAL BED SECTION

- 1210.00 Surgical Ward Cost
- 1211.00 Surgical Intensive Care Unit

- 1212.00 Operating/Recovery Room
- 1213.00 Open Heart Surgery
- 1230.00 Primary Care - Surgery
- 1200.11 Education & Training - Trainee Salary [- Surgical Beds]
- 1200.12 Education & Training - Instructional Support [- Surgical Beds]
- 1200.13 Education & Training - Administrative Support [- Surgical Beds]
- 1200.14 Education & Training - Continuing Education [- Surgical Beds]
- 1200.21 [Medical] Research Support [- Surgical Beds]
- 1200.22 [Prosthetic] Research Support [- Surgical Beds]
- 1200.30 Administration [Support - Surgical Beds]
- 1200.40 Environmental Management [Support - Surgical Beds]
- 1200.50 Engineering [Support - Surgical Beds]
- 1200.70 Equipment Depreciation [- Surgical Beds]
- 1200.80 Building Depreciation [- Surgical Beds]

PSYCHIATRIC BED SECTION

- 1310.00 High Intensity General Psychiatric Inpatient Unit
- 1311.00 General Intermediate Psychiatry
- 1312.00 Substance Abuse Intermediate Care
- 1313.00 Substance Abuse Treatment Program - High Intensity []
- 1314.00 Specialized Inpatient PTSD Unit (SIPU) - Intermediate Care []
- 1315.00 Evaluation/Brief Treatment PTSD Unit (EBTPU) - High Intensity []
- 1316.00 STAR I, II, & III Programs Sustained Treatment and Rehabilitation
- 1317.00 Substance Abuse STAR I, II, & III Programs Sustained Treatment and Rehabilitation
- 1320.00 Geriatric Evaluation and Management (GEM) Unit - Psychiatric Beds
- 1330.00 Primary Care - Psychiatric
- 1300.11 Education & Training - Trainee Salary [- Psychiatric Beds]
- 1300.12 Education & Training - Instructional Support [- Psychiatric Beds]
- 1300.13 Education & Training - Administrative Support [- Psychiatric Beds]
- 1300.14 Education & Training - Continuing Education [- Psychiatric Beds]
- 1300.21 [Medical] Research Support [- Psychiatric Beds]
- 1300.22 [Prosthetic] Research Support [- Psychiatric Beds]
- 1300.30 Administration [Support - Psychiatric Beds]
- 1300.40 Environmental Management [Support - Psychiatric Beds]
- 1300.50 Engineering [Support - Psychiatric Beds]
- 1300.70 Equipment Depreciation [- Psychiatric Beds]
- 1300.80 Building Depreciation [- Psychiatric Beds]

VA NURSING HOME CARE SECTION

- 1410.00 VA Nursing Home Care
- 1420.00 Geriatric Evaluation and Management (GEM) Unit - VA Nursing Home
- 1400.11 Education & Training - Trainee Salary - VA Nursing Home Beds
- 1400.12 Education & Training - Instructional Support - VA Nursing Home Beds
- 1400.13 Education & Training - Administrative Support - VA Nursing Home Beds
- 1400.14 Education & Training - Continuing Education - VA Nursing Home Beds
- 1400.21 [Medical] Research Support [- VA Nursing Home Beds]
- 1400.22 [Prosthetic] Research Support [- VA Nursing Home Beds]
- 1400.30 Administration [Support - VA Nursing Home Beds]
- 1400.40 Environmental Management [Support - VA Nursing Home Beds]
- 1400.50 Engineering [Support - VA Nursing Home Beds]
- 1400.70 Equipment Depreciation [-VA Nursing Home Beds]
- 1400.80 Building Depreciation [-VA Nursing Home Beds]

DOMICILIARY BED SECTION

- 1510.00 Domiciliary Beds
- 1511.00 Domiciliary Substance Abuse
- 1512.00 Domiciliary - PTSD
- 1520.00 Geriatric Evaluation and Management (GEM) Unit - Domiciliary
- 1500.11 Education & Training - Trainee Salary [- Domiciliary Beds]
- 1500.12 Education & Training - Instructional Support [- Domiciliary Beds]
- 1500.13 Education & Training - Administrative Support [- Domiciliary Beds]
- 1500.14 Education & Training - Continuing Education [- Domiciliary Beds]
- 1500.21 [Medical] Research Support [- Domiciliary Beds]
- 1500.22 [Prosthetic] Research Support [- Domiciliary Beds]
- 1500.30 Administration [Support - Domiciliary Beds]
- 1500.40 Environmental Management [Support - Domiciliary Beds]
- 1500.50 Engineering [Support - Domiciliary Beds]
- 1500.70 Equipment Depreciation [- Domiciliary Beds]
- 1500.80 Building Depreciation [- Domiciliary Beds]

INTERMEDIATE CARE BED SECTION

- 1610.00 Intermediate Care
- 1620.00 Geriatric Evaluation and Management (GEM) Unit - Intermediate Care
- 1600.11 Education & Training - Trainee Salary [- Intermediate Care Beds]
- 1600.12 Education & Training - Instructional Support [- Intermediate Care Beds]
- 1600.13 Education & Training - Administrative Support [- Intermediate Care Beds]
- 1600.14 Education & Training - Continuing Education [- Intermediate Care Beds]
- 1600.21 [Medical] Research Support [-Intermediate Care Beds]
- 1600.22 [Prosthetic] Research Support [-Intermediate Care Beds]
- 1600.30 Administration [Support -Intermediate Care Beds]
- 1600.40 Environmental Management [Support -Intermediate Care Beds]
- 1600.50 Engineering [Support -Intermediate Care Beds]
- 1600.70 Equipment Depreciation [-Intermediate Care Beds]
- 1600.80 Building Depreciation [-Intermediate Care Beds]

PSYCHIATRIC RESIDENTIAL REHABILITATION

- 1711.00 PRRTP (Psychiatric Residential Rehabilitation Treatment Program)
- 1712.00 PRRP (PTSD Residential Rehabilitation Program)
- 1713.00 SARRTP (Substance Abuse Residential Rehabilitation Treatment Program)
- 1714.00 HCMI CWT/TR (Homeless Chronically Mentally Ill Compensated Work Therapy / Transitional Residences) [VACO approved]
- 1715.00 SA CWT/TR (Substance Abuse Compensated Work Therapy / Transitional Residences) [VACO approved]
- 1700.11 Education & Training - Trainee Salary [- Psych Residential Rehab Beds]
- 1700.12 Education & Training - Instructional Support [- Psych Residential Rehab Beds]
- 1700.13 Education & Training - Administrative Support [- Psych Residential Rehab Beds]
- 1700.14 Education & Training - Continuing Education [- Psych Residential Rehab Beds]
- 1700.21 [Medical] Research Support [- Psych Residential Rehab Beds]
- 1700.22 [Prosthetic] Research Support [- Psych Residential Rehab Beds]
- 1700.30 Administration [Support - Psych Residential Rehab Beds]
- 1700.40 Environmental Management [Support - Psych Residential Rehab Beds]

- 1700.50 Engineering [Support - Psych Residential Rehab Beds]
- 1700.70 Equipment Depreciation[- Psych Residential Rehab Beds]
- 1700.80 Building Depreciation[- Psych Residential Rehab Beds]

AMBULATORY CARE SECTION

- 2110.00 Medicine
 - 2110.01 Medicine - SOC
 - 2110.02 Medicine - CBC
 - 2110.03 Medicine - ORC
- 2111.00 Admitting/Screening
 - 2111.01 Admitting/Screening - SOC
 - 2111.02 Admitting/Screening - CBC
 - 2111.03 Admitting/Screening - ORC
- 2130.00 Outpatient Primary Care - Medicine
 - 2130.01 Outpatient Primary Care - Medicine - SOC
 - 2130.02 Outpatient Primary Care - Medicine - CBC
 - 2130.03 Outpatient Primary Care - Medicine - ORC
- 2210.00 Surgery
 - 2210.01 Surgery - SOC
 - 2210.02 Surgery - CBC
 - 2210.03 Surgery - ORC
- [2211.00 Ambulatory Operating Room
 - 2211.01 Ambulatory Operating Room - SOC
 - 2211.02 Ambulatory Operating Room - CBC]
- 2230.00 Outpatient Primary Care - Surgery
 - 2230.01 Outpatient Primary Care - Surgery - SOC
 - 2230.02 Outpatient Primary Care - Surgery - CBC
 - 2230.03 Outpatient Primary Care - Surgery - ORC
- 2310.00 Special Psychiatric Treatment
 - 2310.01 Special Psychiatric Treatment - SOC
 - 2310.02 Special Psychiatric Treatment - CBC
 - 2310.03 Special Psychiatric Treatment - ORC
- 2311.00 General Psychiatric Treatment
 - 2311.01 General Psychiatric Treatment - SOC
 - 2311.02 General Psychiatric Treatment - CBC
 - 2311.03 General Psychiatric Treatment - ORC
- 2313.00 PTSD Clinical Team

2313.01 PTSD Clinical Team - SOC
2313.02 PTSD Clinical Team - CBC
2313.03 PTSD Clinical Team - ORC
2316.00 Substance Abuse Dependence - OP
2316.01 Substance Abuse Dependence - OP - SOC
2316.02 Substance Abuse Dependence - OP - CBC
2316.03 Substance Abuse Dependence - OP - ORC
2317.00 Substance Use Disorder (SUPS) -
2317.01 Substance Use Disorder - SOC
2317.02 Substance Use Disorder - CBC
2317.03 Substance Use Disorder - ORC
2330.00 Outpatient Primary Care - Special Psychiatric Treatment
2330.01 Outpatient Primary Care - Special Psychiatric Treatment - SOC
2330.02 Outpatient Primary Care - Special Psychiatric Treatment - CBC
2330.03 Outpatient Primary Care - Special Psychiatric Treatment - ORC
2331.00 Outpatient Primary Care - General Psychiatric Treatment
2331.01 Outpatient Primary Care - General Psychiatric Treatment - SOC
2331.02 Outpatient Primary Care - General Psychiatric Treatment - CBC
2331.03 Outpatient Primary Care - General Psychiatric Treatment - ORC
2410.00 Dialysis
2410.01 Dialysis - SOC
2510.00 Adult Day Health Care
2510.01 Adult Day Health Care - SOC
2510.02 Adult Day Health Care - CBC
2510.03 Adult Day Health Care - ORC
2610.00 Ancillary Services
2610.01 Ancillary Services - SOC
2610.02 Ancillary Services - CBC
2610.03 Ancillary Services - ORC
2611.00 Rehabilitative and Supportive Services
2611.01 Rehabilitative and Supportive Services - SOC
2611.02 Rehabilitative and Supportive Services - CBC
2611.03 Rehabilitative and Supportive Services - ORC
2612.00 Diagnostic Services
2612.01 Diagnostic Services - SOC
2612.02 Diagnostic Services - CBC
2612.03 Diagnostic Services - ORC
2613.00 Pharmacy
2613.01 Pharmacy - SOC

2613.02 Pharmacy - CBC
2613.03 Pharmacy - ORC
2614.00 Prosthetics/Orthotics
2614.01 Prosthetics/Orthotics - SOC
2614.02 Prosthetics/Orthotics - CBC
2614.03 Prosthetics/Orthotics - ORC
2616.00 SCI Substance Abuse OP (*only applicable to VAMC Bronx*)
2710.00 Dental Procedures
2710.01 Dental Procedures - SOC
2750.00 Domiciliary Aftercare - VA
2780.00 Telephone Contacts
2800.11 Education & Training - Trainee Salary [- Outpatient]
2800.12 Education & Training - Instructional Support [- Outpatient]
2800.13 Education & Training - Administrative Support [- Outpatient]
2800.14 Education & Training - Continuing Education [- Outpatient]
2800.21 [Medical] Research Support [- Outpatient]
2800.22 [Prosthetic] Research Support [- Outpatient]
2800.30 Administration [Support - Outpatient]
2800.40 Environmental Management [Support - Outpatient]
2800.50 Engineering [Support - Outpatient]
2800.70 Equipment Depreciation [- Outpatient]
2800.80 Building Depreciation [- Outpatient]

CONTRACT INPATIENT CARE SECTION

3110.00 Contract Hospital - Medical
3210.00 Contract Hospital - Surgical
3310.00 Contract Hospital - Psychiatric
3410.00 Community Nursing Home Care
3411.00 State Home Nursing Home Care
3510.00 State Domiciliary Home Care
3520.00 Contract Homeless Chronically Mentally Ill
3521.00 Contract Alcohol and Drug Treatment and Rehabilitation
3610.00 State Home Hospital Care
3611.00 Civilian Health and Medical Program VA (CHAMPVA)
3800.30 Administration [Support - Inpatient Non-VA]
3800.40 Environmental Management [Support - Inpatient Non-VA]
3800.50 Engineering [Support - Inpatient Non-VA]
3800.70 Equipment Depreciation [- Inpatient Non-VA]

3800.80 Building Depreciation [- Inpatient Non-VA]

FEE AMBULATORY CARE SECTION

4110.00 Outpatient Care - Fee Medical
4111.00 Other Non-VA Outpatient Care
4112.00 Contract Adult Day Health Care
4120.00 Contract Dialysis
4130.00 Fee Prescriptions Filled by VA Pharmacies
4610.00 CHAMPVA - OP
4612.00 Non-VA Pharmacies
4613.00 Fee Tests Performed by VA Laboratories
4710.00 Dental Services - Fee
4800.30 Administration [Support - Outpatient Non-VA]
4800.40 Environmental Management [Support - Outpatient Non-VA]
4800.50 Engineering [Support - Outpatient Non-VA]
4800.70 Equipment Depreciation [- Outpatient Non-VA]
4800.80 Building Depreciation [- Outpatient Non-VA]

VA HOME PROGRAMS SECTION

5110.00 Hospital Based Home Care
5110.30 []Administration [Support - Hospital Based Home Care]
5110.40 []Environmental Management Support - Hospital Based Home Care]
5110.50 []Engineering [Support - Hospital Based Home Care]
5111.00 Home Dialysis
5112.00 Spinal Cord Injury Home Care
5113.00 Residential Care Home Program
5114.00 Other Home Based Programs
5115.00 Community Based Domiciliary Aftercare / Outreach
5116.00 Homemaker / Home Health Aide Programs
5117.00 Intensive Psychiatric Community Care
5000.30 Administration [Support - Off-Facility VA Programs]
5000.40 Environmental Management [Support - Off-Facility VA Programs]
5000.50 Engineering [Support - Off-Facility VA Programs]
5000.70 Equipment Depreciation [- Off-Facility VA Programs]
5000.80 Building Depreciation [- Off-Facility VA Programs]

MISCELLANEOUS ACTIVITIES SECTION

- 6010.00 Other Miscellaneous Benefits and Services
- 6011.00 Regional/National Support
- 6013.00 Continuing Education and Training Programs
- 6015.00 National Center on PTSD
(applicable only to West Haven, White River Junction, Palo Alto, and Boston VAMCs)
- 6000.70 Equipment Depreciation [- Miscellaneous Benefits and Services]
- 6000.80 Building Depreciation [- Miscellaneous Benefits and Services]

INTER-STATION TRANSFERS SECTION

- 7000.10 Direct Care Services
- 7000.30 [Administration] Services
- 7000.40 Environmental Management Services
- 7000.50 Engineering Services

SERVICES FURNISHED TO OTHER THAN VHA

- 8021.00 Services Furnished to Veterans Benefits Admin. (VBA)
- 8022.00 Services to the National Cemetery System (NCS)
- 8023.00 Services to Other Non-VHA Activities
- 8024.00 DoD Sharing
- 8025.00 Other Sharing
- 8000.70 Equipment Depreciation [- Services Furnished to Other Than VHA]
- 8000.80 Building Depreciation [- Services Furnished to Other Than VHA]

SECTION II:

- ____.11 Trainee Salary - Education & Training
- ____.12 Instructional Support - Education & Training
- ____.13 Administrative Support - Education & Training
- ____.14 Continuing Education - Education & Training
- ____.21 Medical Research Support
- ____.22 Prosthetic Research Support

SECTION III:

- 9010.00 Inpatient HIV/ARC/AIDS
- 9011.00 Outpatient HIV/ARC/AIDS
- 9020.00 Renal Transplant
- 9030.00 Mental Hygiene Clinic
- 9031.00 Day Hospital
- 9032.00 Day Treatment Center
- 9051.00 Electron Microscopy Unit
- 9053.00 Supervoltage Therapy

APPENDIX B

GLOSSARY FOR RCS 10-0141

1. **ALL OTHER COSTS** - Expenditures reflected in the [FMS cost accounting system] (2000 series BOCs) for supplies consumed and services utilized.
2. **AMIS - AUTOMATED MANAGEMENT INFORMATION SYSTEM** is the system which supplies some units or patient days to the CDR.
3. **BDC - BOSTON DEVELOPMENT CENTER** is a branch of the VA Central Office Budget Office under the auspices of the Associate Chief Medical Director for Resource Management. The BDC, which is located in Braintree, Massachusetts, consists of several departments.
4. **[FMS - FINANCIAL MANAGEMENT SYSTEM]** is the system which supplies the RCS 10-0141 with the following: fee hours; payroll (personal service costs); and the cost (All Other) of supplies consumed and services utilized. [FMS is a department-wide system designed to meet management requirements to establish and maintain effective consolidated financial systems and to implement the U.S. Standard General Ledger.]
5. **CDR - COST DISTRIBUTION REPORT** - RCS 10-0141 Report. Report which reflects the cost of patient care provided through the VA medical system. Each service is responsible for the allocation of its cost to the appropriate CDR distribution accounts. Data input by all services is required to be done monthly. The CDR database uses data received in batch mode from LOG1, ISMS, [FMS], OPC, AMIS, and data entered on-line. Data is available for on-line inquiry by stations and Central Office. This system will interface with the [FMS] system. However, when the DSS system is fully functional, the CDR interface will no longer be necessary.
6. **CDR OUTLIERS** - Prior to the close-out of the databases, the BDC produces data which displays a facility's reported costs and workload per CDR account, with unit cost calculations, and compares this data with the facility's peer hospital group. The analysis identifies accounts with unit costs significantly different (more than two standard deviations either above or below) from the hospital group's average.
7. **CMR - CONSOLIDATED MEMORANDUM RECEIPT** is a listing of non-expendable inventory.

8. **DEPARTMENT COST** - The total national cost divided by total national reported workload (units) for each CDR account.
9. **DETAIL REPORT** - A CDR report that reflects by cost center the total costs, workload, and FTEE distributed to the activity accounts. It also shows the facility, group, and department (national) unit costs which can be used for comparative purposes.
10. **DIRECT COSTS** - All clinical and ancillary costs in connection with activities directly involved with the care and treatment of a VA staff or contract/fee patient [1000-5000 CDR accounts].
11. **DSS - DECISION SUPPORT SYSTEM** provides information describing the patterns of patient care and utilization of hospital resources at VA medical facilities by clinic, ward, and diagnostic related group. This system will interface with the FMS system.
12. **DRG - DIAGNOSIS RELATED GROUPS.** DRG assignment factors: (1) principal diagnosis; (2) secondary diagnosis; (3) surgical procedures; (4) age; (5) sex; (6) discharge status. All discharges reported in the PTF are categorized into one of 490 DRG groups, and one of 25 Major Diagnostic Categories (MDC).
13. **EXPENDABLE** - Supplies purchased by the VA which are immediately charged as operating expense and are not recorded as assets.
14. **FEE FILE** - The RPM non-VA visit costing methodology uses the Outpatient Fee file for both cost and workload. The fee file includes patient specific data and a fee cost in each record. These amounts are expected to represent the dollars distributed in the Outpatient Care - Fee Medical CDR account (4110.00).

The remaining outpatient non-VA CDR accounts, listed below, are not costed to specific patients since there is no corresponding patient specific data set. The status of these accounts may change in the future.

- 4111.00 - Other Non-VA Outpatient Care
- 4112.00 - Contract Adult Day Health Care
- 4120.00 - Contract Dialysis
- 4130.00 - Fee Prescriptions Filled by VA Pharmacy
- 4610.00 - CHAMPVA OP

4612.00 - Non-VA Pharmacies
4613.00 - Fee Tests Performed by VA Labs
4710.00 - Dental Services - Fee

[]

15. **FTEE** - Refers to FULL-TIME EMPLOYEE EQUIVALENT.
16. **GIP - GENERIC INVENTORY PACKAGE** is a station level inventory system for posted stock and expendable supplies that can be used by all Services.
17. **GROUP COST** - The total cost of the hospital group divided by the total group reported workload (units) for each CDR account.
18. **HOSPITAL GROUP** - An aggregation of similar VA medical centers based largely on complexity factors, size, level of academic affiliation and geographic location.
19. **INDIRECT COSTS** - All costs not otherwise identified as direct costs. These are the (.11-.50) accounts (see paragraph 1.2d(3) for account suffix titles).
20. **ISMS - INTEGRATED SUPPLY MANAGEMENT SYSTEM** is a centralized inventory management system for Supply Fund at VA Supply Depots. It is the replacement system for LOG1 and provides an inventory control and accounting system for selected nonperishable, expendable goods. This system will interface with the FMS system.
21. **JURISDICTIONAL COST CENTER REPORT** - A CDR report that is cost center specific. It reflects the CDR distribution accounts to which each cost center's total costs were charged. This report also shows cost by [BOC] category; i.e. 1081 Physicians, 2103 Employee Training Travel, etc.
22. **LOG1 - INTEGRATED PROCUREMENT STORAGE AND DISTRIBUTION SYSTEM** contains data on inventory and assets. Linkage with this system allows The RCS 10-0141 to track inventory and assets to the service that is using them. This system is scheduled to be replaced by the ISMS system.
23. **OPC - OUTPATIENT CLINIC FILE** is an automated system for recording and tracking events associated with each VA patient's outpatient clinical progress. The OPC file is the principal source of outpatient workload data. OPC File Clinic Stops are linked with the CDR ambulatory care (2000 series) accounts.

24. **PAF - PATIENT ASSESSMENT FILE** is an automated system for recording and tracking events associated with each VA patient's clinical progress in a long term care setting (e.g., nursing home, domiciliary, etc.). RUGS II values shown in the PAF are used to weight long term care patient costing as appropriate.

25. **PAID - PERSONNEL AND ACCOUNTING INTEGRATED DATA** is the system which supplies to the RCS 10-0141 the cumulative man-hours (FTEE) and salary costs (Personal Services - 1000 series **[BOC]**s) by cost center. This system will interface with the FMS system.

26. **PER DIEM** - In the RPM process, a linkage is made between the Bed Specialty Codes identified in the PTF and the inpatient accounts identified in the CDR, and a facility per diem is calculated for each bed service by dividing the total CDR dollars by the total PTF patient days as the first step in developing patient specific costing. This per diem will be different than the unit cost shown on the CDR because the CDR uses AMIS days of care. The two reporting systems do not necessarily reconcile due to different reporting criteria.

27. **PERSONAL SERVICES COSTS** - Expenditures paid to employees as wages plus cost of fringe benefits.

28. **PTF - PATIENT TREATMENT FILE** - Principal source of inpatient workload data. An automated system for recording and tracking events associated with each VA patient's inpatient clinical progress.

29. **RPM - RESOURCE PLANNING AND MANAGEMENT** is an agency-wide management system designed to integrate strategic, budget and construction planning and resource distribution within the Veterans Health Administration. In the basic RPM formula, the term "resources" is defined as workload times unit cost. Projected workload is the critical element.

30. **SPECIALIZED MEDICAL SERVICES** - Programs for which an account number in the CDR 9000 series has been assigned and for which costs have been directed by VA Central Office Program Officials to be reported in Section III of the RCS 10-0141 Report. Although these costs are reported in Section I, due to congressional requirements, they are more specifically identified in Section III.

31. **UNIT COST OUTLIERS** - Data produced by the BDC using RPM per diem costing which identifies individual hospital unit costs that are outside the boundaries

established around the peer group's averages (both high and low ends). Facilities are given an opportunity to review the unit costs and to discuss them with their Regional Director's office if unique aspects are found that deserve attention.

32. **UNIT COST** - Total cost divided by total reported workload (units) for each CDR account at the facility, hospital group, and national levels.

33. **UNITS** - The measurable workload reported for each individual CDR account; e.g., patient days, surgical procedures, outpatient visits, prescriptions filled. Refer to Chapter 1 of the VA Central Office CDR Handbook for a complete listing.

**APPENDIX C
COST CENTERS AND SUBACCOUNTS**

1.1 CDR Cost Centers

The Cost Distribution Report (CDR) uses all of the FMS Medical Care appropriation cost centers []. However, the CDR combines some of the cost centers that represent similar activities. The CDR system allows only valid cost centers to be distributed to the report. If an invalid cost center is in the FMS data, the CDR will combine the invalid cost centers with a valid cost center based on historical use of the invalid cost center. If the invalid cost center never existed, the cost in that cost center will not be available for distribution. The following list identifies the cost centers available for CDR distribution and the cost centers which have been combined into the CDR valid cost centers. The cost centers in the list will be identified by the 2nd, 3rd, and 4th digits only.

CDR Cost Center	Cost Centers Included in CDR Cost Center
201	201, 206 and 238
202	202
203	203
204	204
205	205
211	211
212	212
221	221
222	222
223	223
224	224
225	225
226	226
227	227
228	228
229	229
231	231
232	232
233	233
234	234

CDR Cost Center	Cost Centers Included in CDR Cost Center
235	235
236	236
237	237
241	207, 240 and 241
242	242
243	243
244	244
245	245
246	246
247	247
248	248 and 251
252	252
265	265
266	266
269	239 and 269
270	271, 272, 273, 274, 275, 276, 277 and 278
281	281 and 442
285	285 and 415
286	286 and 412
311	311
313	313
315	315
317	317
320	321, 322, 323, 324, 325, 326, 327 and 329
331	331
332	332
333	333
341	341
342	342
343	343
[344	344]
351	351
361	361
362	362
363	263 and 363
364	262 and 364
401	401 and 406
402	402

CDR Cost Center	Cost Centers Included in CDR Cost Center
403	403
405	405
407	407
409	409
411	411
413	413
414	414
416	416
419	419
421	421
431	431
441	441
445	445
451	451
470	470
500	501, 503, 504, 521 and 533
511	511 and 531
532	532
541	541
542	542
550	505, 551 and 555
561	561
562	562
563	563
564	564 and 566
565	565 and 573
567	567
570	570
571	571 and 572
575	575 and 577
601	601
602	602
603	603
604	604
605	605
606	606
607	607
610	610

CDR Cost Center	Cost Centers Included in CDR Cost Center
615	615
621	621
622	622
623	623
[]
631	631
632	632
649	264 and 649
651	408, 461 and 651
652	652
653	653
655	404 and 655
660	660
681	681
682	682

1.2 CDR Subaccounts

The Cost Distribution Report (CDR) uses all of the FMS subaccounts/budget object codes except those in the 3000 series. However, the CDR uses only selected subaccounts and combines the remaining subaccounts into a generic subaccount 0000.

CDR Subaccount	Subaccounts/Budget Object Codes in CDR Subaccount
0000	All subaccounts not identified below. This subaccount has a personal service and an all other component.
1041	1041, 1042, 1043, 1044, 1045, 1046, 1047, 1048, 1049, 1051, 1052, 1053, 1054, 1056, 1062, 1073, 1077, 1083 and 1088
1061	1061, 1063 and 1064 for the 200 series cost centers only
1081	1081 and 1082 for the 200 series cost centers only
2103	2103, 2583 and 2584 (does not include the 600 series of cost centers)
2561	2561 for cost center 363 only
2571	2571 for cost center 363 only
2575	2575
2579	2579

2582	2582
2587	2587
2635	2635
2636	2636 for cost center 363 only
2692	2692 for cost centers 201 and 202 only

APPENDIX D

Workload Units Type and Source

The workload units contained in the RCS 10-0141 are acquired mostly via linkage with other VA data systems; however, some program workload data is not automated and must be submitted with the RCS 10-0141 data. The following listing contains the source of workload units for the RCS 10-0141 accounts.

CDR ACCT	UNITS	SOURCE OF UNITS
1110.00	Bed Days	AMIS Seg 336(011) minus Units for (1117.00, 1130.00 and Acute Medicine GEM)
1111.00	Bed Days	AMIS Seg 337(011) minus Epilepsy Center Days and Units for Neurology GEM
1113.00	Bed Days	AMIS Seg 338(011) minus Units for Rehab GEM
1114.00	Bed Days	Neurology Service
1115.00	Bed Days	AMIS Seg 339(011)
1116.00	Bed Days	AMIS Seg 340(011) minus Units for 1116.01
1116.01	Bed Days	Locally supplied
1117.00	Bed Days	Locally supplied
1118.00	Treatments	Locally supplied
1119.00	Bed Days	Locally supplied
1120.00	Bed Days	Locally supplied
1130.00	Bed Days	Locally supplied ¹
1210.00	Bed Days	AMIS Seg 341(011) minus J42(008) and Units for 1230.00
1211.00	Bed Days	AMIS Seg J42(008)
1212.00	Surgical Procedures	Surgical Service (excl Open Heart and all ambulatory surgical procedures)
1213.00	Surgical Procedures	Surgical Service (Open Heart inpatient procedures only)
1230.00	Bed Days	Locally supplied
1310.00	Bed Days	AMIS Seg 334(011+012) minus 311(020), 314(020), 315(015) and Units for (1311.00, 1312.00, 1314.00, 1315.00, 1316.00, 1317.00, 1320.00, 1330.00, 1711.00, 1712.00, 1713.00.

CDR ACCT	UNITS	SOURCE OF UNITS
		1714.00 and 1715.00)
1311.00	Bed Days	Locally supplied
1312.00	Bed Days	Locally supplied
1313.00	Bed Days	AMIS Seg 311(020)+314(020)+315(015)
1314.00	Bed Days	Locally supplied
1315.00	Bed Days	Locally supplied
1316.00	Bed Days	Locally supplied
1317.00	Bed Days	Locally supplied
1320.00	Bed Days	Locally supplied
1330.00	Bed Days	Locally supplied
1410.00	Bed Days	AMIS Seg 345(015) minus Units for 1420.00
1420.00	Bed Days	Locally supplied
1510.00	Bed Days	AMIS Seg 346(015)
1511.00	Bed Days	AMIS Seg 319(020)
1512.00	Bed Days	Locally supplied
1520.00	Bed Days	Locally supplied
1610.00	Bed Days	AMIS Seg 335(011) minus Units for 1620.00
1620.00	Bed Days	Locally supplied
1711.00	Bed Days	Locally supplied
1712.00	Bed Days	Locally supplied
1713.00	Bed Days	Locally supplied
1714.00	Bed Days	Locally supplied
1715.00	Bed Days	Locally supplied
2110.00	Clinic Stops	301 General Internal Medicine 302 Allergy Immunology 303 Cardiology 304 Dermatology 305 Endocrinology/Metabolic 306 Diabetes 307 Gastroenterology 308 Hematology 309 Hypertension 310 Infectious Disease 311 Pacemaker 312 Pulmonary/Chest 313 Renal/Nephrology 314 Rheumatology/Arthritis 315 Neurology

CDR ACCT	UNITS	SOURCE OF UNITS
		316 Oncology/Tumor
		317 Coumadin Clinic
		318 Geriatric Clinic
		319 Geriatric Evaluation & Management (GEM) Clinic
		320 Alzheimer's/Dementia Clinic
		321 GI Endoscopy
		322 Women's Clinic
		328 Medical Day Unit MSDU
		330 Chemotherapy Procedures Unit - Medicine
		331 Pre-Bed Care MD (Medicine)
		332 Pre-Bed Care RN (Medicine)
2111.00	Clinic Stops	101 Emergency Unit
		102 Admitting / Screening
2130.00	Clinic Stops	323 Primary Care / Medicine
2210.00	Clinic Stops	329 Ambulatory Care Procedures Unit
		331 Pre-Bed Care MD (Medicine)
		401 General Surgery
		402 Cardiac Surgery
		403 ENT
		404 Gynecology
		405 Hand Surgery
		406 Neurosurgery
		407 Ophthalmology
		408 Optometry
		409 Orthopedics
		410 Plastic Surgery
		411 Podiatry
		412 Proctology
		413 Thoracic Surgery
		414 Urology
		415 Vascular Surgery
		416 Ambulatory Surgery Office
		419 Anesthesia Pre-Op Consult
		420 Pain Clinic
		421 Vascular Laboratory
		422 Cast Clinic
		426 Women Surgery

CDR ACCT	UNITS	SOURCE OF UNITS
		431 Chemotherapy Procedures Unit - Surgery
		432 Pre-Bed Care MD (Surgery)
		433 Pre_Bed Care RN (Surgery)
2211.00	Clinic Stops	327 Medicine Physician Performing
		429 Ambulatory Care or OR Surgery Outpatient Surgery Room
2230.00	Clinic Stops	430 Cysto Room Unit for Outpatient
2310.00	Clinic Stops	427 Primary Care / Surgery
		516 PTSD - Group
		521 Long-Term Enhancement - Group
		550 Mental Health Clinic - Group
		553 Day Treatment - Group
		554 Day Hospital - Group
		557 Psychiatry - Group
		558 Psychology - Group
		573 Incentive Therapy
		574 Compensated Work Therapy
		575 Vocational Assistance
2311.00	Clinic Stops	577 Psychogeriatric Clinic - Group
		502 Mental Health Clinic - Individual
		505 Day Treatment - Individual
		506 Day hospital - Individual
		509 Psychiatry - Individual
		510 Psychology - Individual
		512 Psychiatry Consultation
		515 CWT/TR-HCMI
		520 Long-Term Enhancement - Individual
		524 Sexual Trauma Counseling - Women Veterans
		525 Women s Stress Disorder Treatment Teams
		529 HCHV/HMI
		562 PTSD - Individual
		576 Psychogeriatric Clinic - Individual
		578 Psychogeriatric Day Program
2313.00	Clinic Stops	540 PCT-Post Traumatic Stress
2316.00	Clinic Stops	507 Drug Dependence - Individual
		508 Alcohol Treatment - Individual
		513 Substance Abuse - Individual
		514 Substance Abuse - Home Visit

CDR ACCT	UNITS	SOURCE OF UNITS
		517 CWT/Substance Abuse
		518 CWT/TR - Substance Abuse
		522 HUD-VASH
		523 Methadone Maintenance
		555 Drug Dependence - Group
		556 Alcohol Treatment - Group
		560 Substance Abuse - Group
2317.00	Clinic Stops	519 Substance Use Disorder/PTSD Teams
2330.00	Clinic Stops	563 Primary Care / Spec. Psy
2331.00	Clinic Stops	531 Primary Care / General Psy
2410.00	Clinic Stops	602 Chronic Assisted Hemodialysis Treatment
		603 Limited Self Care Hemodialysis Treatment
		604 Home Hemodialysis Training
		606 Chronic Assisted Peritoneal Dialysis
		607 Limited Self Care Peritoneal Dialysis
		608 Home/Self Peritoneal Dialysis Training
2510.00	Clinic Stops	190 Adult Day Health Care
2610.00	Clinic Stops	117 Nursing
		120 Health Screening
		122 Public Health Nursing
		123 Nutrition/Dietetics - Individual
		124 Nutrition/Dietetics - Group
		125 Social Work Service
		160 Clinical Pharmacy
		165 Bereavement Counseling
		166 Chaplain Service - Individual
		167 Chaplain Service - Group
		168 Chaplain Service - Collateral
		999 Employee Health
2611.00	Clinic Stops	201 Physical Medicine & Rehabilitation Service
		202 Recreation Therapy Service
		203 Audiology
		204 Speech Pathology
		205 Physical Therapy
		206 Occupational Therapy
		207 PM&RS Incentive Therapy
		208 PM&RS Compensated Work Therapy
		209 VIST Coordinator

<u>CDR ACCT</u>	<u>UNITS</u>	<u>SOURCE OF UNITS</u>
		210 Spinal Cord Injury
		211 Amputation Follow-Up Clinic
		212 EMG - Electromyogram
		213 PM&RS Vocational Assistance
		214 Kinesiotherapy
2612.00	Clinic Stops	104 Pulmonary Function
		105 X-Ray
		106 EEG
		107 EKG
		108 Laboratory
		109 Nuclear Medicine
		115 Ultrasound
		126 Evoked Potential
		127 Topographical Brain Mapping
		128 Prolonged Video EEG Monitoring
		144 Radionuclide Therapy
		145 Pharmacology/Physiologic Nuclear Perfusion Studies
		146 PET
		149 Radiation Therapy Treatment
		150 Computerized Tomography (CT)
		151 Magnetic Resonance Imaging (MRI)
		152 Angiogram Catherterization
		153 Interventional Radiography
2613.00	Prescrip Filled	AMIS Seg 157(001+002+003+004-006)
2614.00	Clinic Stops	417 Prosthetic, Orthotics
		418 Amputation Clinic
		423 Prosthetic Services
2616.00		Locally Supplied
2710.00	CTV	DAS 270
2750.00	Clinic Stops	727 Domiciliary Aftercare - VA
2780.00	Clinic Stops	103 Telephone / Triage
		147 Telephone / Ancillary
		148 Telephone / Diagnostic
		169 Telephone / Chaplain
		178 HBHC / Telephone
		181 Telephone / Dental
		216 Telephone / Rehab & Support

<u>CDR ACCT</u>	<u>UNITS</u>	<u>SOURCE OF UNITS</u>
		324 Telephone / Medicine
		325 Telephone / Neurology
		326 Telephone / Geriatrics
		424 Telephone / Surgery
		425 Telephone / Prosthetics/Orthotics
		428 Telephone / Optometry
		526 Telephone / Special Psychiatry
		527 Telephone / General - Psychiatry
		528 Telephone / Homeless Mentally Ill
		530 Telephone / HUD - VASH
		542 Telephone / PTSD
		545 Telephone / Substance Abuse
		546 Telephone / IPCC
		579 Telephone / Geriatric Psychiatry
		611 Telephone / Dialysis
		729 Telephone / Domiciliary
2800.00	Clinic Stops	Units (clinic stops) for accounts 2110.xx thru 2780.xx plus clinic stop 180 and the units for account 2211.xx.
3110.00	Bed Days	AMIS Seg 344(008)+347(008)+348(008)
3210.00	Bed Days	AMIS Seg 344(018)+347(018)+348(018)
3310.00	Bed Days	AMIS Seg 344(028)+347(028)+348(028)
3410.00	Bed Days	AMIS Seg 349(015)
3411.00	Bed Days	AMIS Seg 350(018)
3510.00	Bed Days	AMIS Seg 350(009)
3520.00	Bed Days	Locally supplied
3521.00	Bed Days	Locally supplied
3610.00	Bed Days	AMIS Seg 350(027)
3611.00	Bed Days	Locally supplied
4110.00	Visits	AMIS Seg 228(002+005+008+011+014+017+020+023)
4112.00	Visits	Locally supplied
4120.00	Dialysis	AMIS Seg J19(061+062)
4130.00	Prescriptions	AMIS Seg 157(006)
4610.00	Visits	Locally supplied
4612.00	Prescriptions	AMIS Seg 157(017)
4613.00	Tests	Locally supplied
5110.00	Bed Days	Austin - HBHC Program

<u>CDR ACCT</u>	<u>UNITS</u>	<u>SOURCE OF UNITS</u>
5111.00	Dialysis	AMIS Seg J19(053+054)
5112.00	Bed Days	AMIS Seg 363(006+007+008+009)
5113.00	Bed Days	Locally supplied
5115.00	Clinic Stops	725 Domiciliary Outreach Services 726 Domiciliary Aftercare - Community
5116.00	Visits	Locally supplied
5117.00	Clinic Stops	504 IPCC Medical Center Visit 551 IPCC Community Clinic/Day Prog. Visit 552 IPCC Community Visit
8021.00	Cum FTE at Supported VBA activity	Locally supplied
8022.00	No. of Nat l Cemeteries serviced	Locally supplied
8024.00	Amt Billed DoD	Locally supplied
8025.00	Amt Billed Sharing Fac	Locally supplied
9010.00	Bed Days	Locally supplied
9011.00	Visits	Locally supplied
9020.00	Transplants	Locally supplied
9030.00	Visits	AMIS Seg 223(019+020)
9031.00	Visits	AMIS Seg 223(022)
9032.00	Visits	AMIS Seg 223(021)
9051.00	Specimens	AMIS Seg J08(001 then 018)
9053.00	Visits	AMIS Seg 186(036+038)+189(036+038)

NOTE: If the account number is in the 2000 series of numbers, the source of units for the 2xxx.00 account will also apply the 2xxx.01, 2xxx.02, and 2xxx.03 accounts.

¹ Units for the GEM - Medical Beds may be identified as acute medicine, neurology, or rehabilitation days of care. It will be necessary to adjust the units for CDR accounts 1110.00, 1111.00, and 1113.00 to prevent duplicate reporting of days of care. The On-line Units screen will display accounts 1121.00, 1122.00, and 1123.00 in place of the GEM account 1120.00. Enter units for acute medicine GEM into account 1121.00; units for rehabilitation GEM into account 1122.00; and units for neurology GEM into account 1123.00.