

**Department of
Veterans Affairs**

Memorandum

Date: December 2, 2021

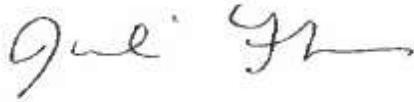
From: Acting Deputy to the Assistant Under Secretary for Health (AUSH) for Community Care performing the delegable duties of the AUSH for Community Care (13)

Subj: Additional Stop Codes for Community Care Consults (VIEWS 06360587)

To: Veterans Integrated Service Network Directors (VISN 1-23)

1. The purpose of this memorandum is to provide guidance for associating additional stop codes to the required 669 stop code on community care consults. The additional specialty specific stop codes will allow for the ability to distinguish the type of care being rendered in the community and provide for better tracking and trending of care purchased in the community as compared to care provided within VA.
2. VISN Business Implementation Managers (BIMs) must coordinate with facility community care staff, group practice managers, facility Clinical Application Coordinators (CACs) and/or other stakeholders to identify the appropriate additional stop codes that need to be added for their respective VA Medical Centers' (VAMCs) specialty care needs and then for the facility CACs to add them. Key elements to consider when applying additional stop codes are:
 - a. Application of additional stop codes should apply only to community care consults, not internal VA provided clinic consults.
 - b. Consider the level of specificity of the consult and its services to ensure the additional stop code meets a similar level of specificity allowing for accurate data collection.
3. The following resources are provided to assist with this process:
 - [CACs Guide: How to Add Additional Stop Codes to Community Care Consult Titles](#)
 - [Community Care Consult Enhancement- Adding Additional Stop Code SOP](#)
 - Office of Community Care (OCC) Field Guidebook (FGB) [FGB Specialty Program Section 1.3](#) and [FGB Chapter 6.17](#)

4. When the VA Medical Center has updated all applicable consults with the additional associated stop code, the facility CAC is required to attest to the completion by using the "Stop Code Attestation Power App" tool found on the OCC Utilization Management SharePoint site at [OCC Utilization Management SharePoint](#).
5. This action is mandatory for all sites and must be completed within 30 days of the date of this memorandum with the exception of VAMCs that have already transitioned or will be transitioning to Cerner within six (6) months of the date of this memorandum.
6. Once an additional stop code has been added to the community care consult set up, sites will be able to review the [Consult - Request Service Classification](#) report available on the [VSSC Consult Switchboard Report](#) to analyze consult volumes and timeliness at the stop code level both for internal VA and community care consults. VAMCs are also required to manage and update the stop codes for their consults accordingly when the semi-annual stop code changes occur in April and October of each year.
7. If you have any questions, contact Clinical Integration and Field Operations leadership at VHAOCCCLeadership@va.gov.



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