



## Standardized Episode of Care (SEOC)

### Key Points

- The Department of Veterans Affairs (VA) determines a Veteran's eligibility to receive care from a Community Care Network (CCN) provider, and which types of care the Veteran can receive.
- VA will issue an approved referral to authorize a specific standardized episode of care (SEOC), which will include the specified number of visits, services and duration (not to exceed one year).
- If a Veteran's SEOC is updated by VA with new or removed procedure codes, the services associated with the original SEOC listed on the approved referral are valid through the end date of the referral.

### What is a SEOC?

A SEOC is a standardized bundle of services and procedures that relate to a specific category of care or sub-specialty. All services or procedures in a SEOC are authorized for the approved referral as medically necessary. The VA CCN provider should view the consult order to determine what services VA is requesting.



VA CCN providers can view the SEOC overview on the approved referral.

<b>Provisional Diagnosis:</b> M170 Bilateral primary osteoarthritis of knee		
<b>Service Requested:</b> Orthopedics -Joint osteoarthritis or replacement PRCT SEOC 1.0.4		
<b>Category of Care:</b> ORTHOPEDIC		
<b>Procedural Overview</b>		
Orthopedics -Joint osteoarthritis or replacement PRCT SEOC 1.0.4		
<b>No.</b>	<b>Service/Procedure</b>	<b>No. Visits Authorized</b>
1	Initial outpatient evaluation and treatment for the referred condition indicated on the con 999 sult - Orthopedics -Joint osteoarthritis or replacement PRCT	

If a SEOC is updated by VA by adding or removing procedure codes, the services associated with the original SEOC listed on the approved referral are valid through the end date of the referral.

### Requesting Approval for Additional Services

When a community provider identifies a need for care that falls outside of the Veteran’s SEOC, or a need to extend the number of authorized visits included in the approved referral, the provider will send a Request for Services (RFS) to VA. If VA approves the request, VA will send a new approved referral to the community provider. The RFS Form is located at [vacomcommunitycare.com](http://vacomcommunitycare.com) > I am a Provider > Documents & Links.

### Locating a SEOC within VA’s HealthShare Referral Manager (HSRM)

HSRM is VA’s secure online portal for managing referrals and authorizations. Providers can find more information about HSRM at [va.gov/communitycare](http://va.gov/communitycare) > For Community Providers > Care Coordination.

VA prefers that community providers use HSRM to receive and view approved referrals. This allows providers to easily view the specific SEOC associated with the Veteran’s care.

You can find the “SEOC Details” when you’re in HSRM, under the Service Requested section of the approved referral. Sample SEOCs are for illustration only.

1. Access HSRM: [access.va.gov/accessva](http://access.va.gov/accessva)
2. Register or Sign-In
3. Under the Service Requested section of the approved referral, click on the “SEOC Details” link in green font.

HealthShare Referral Manager DEMO R19\_USXX\_ADHOC7\_B13

Community Provider

TWO Veteran 01/01/1900 119 Yrs Male 000 MAPLE LANE

Service/s Requested

Category of Care: RADIOLOGY CT SCAN

\* Service Requested: CT Scan SEOC 1.0.2 PRCT

SEOC Details

This referral is only valid for the services authorized under this standardized episode of care (SEOC). An overview of services and number of visits authorized for this SEOC can be viewed using the "SEOC Details" link above.

For additional billing and referral information, please click the "Billing and Other Referral Information" tab underneath the "Print" tab on the vertical ellipse action menu in the top right corner of this screen.

If additional services are needed, or for questions related to this referral, please contact the referring VA facility listed above.

**Precertification:** The Department of Veterans Affairs (VA) is required by law to obtain precertification and bill Third Party Payers for care that is not related to a Veteran's Service Connection or Special Authority for Veterans that have Other Health Insurance (OHI). The Veterans Health Administration (VHA) Office of Community Care (OCC) Standardized Episode Of Care (SEOC) referral you have accepted may include specific services that require Third Party Payer precertification. It is imperative that you notify the VA if you have scheduled any of these specific services for a Veteran that has OHI, so that VA can notify the Third Party Payer. Notification details and specific care requiring precertification for this SEOC can be found at: [https://www.va.gov/communitycare/providers/precert\\_requirements](https://www.va.gov/communitycare/providers/precert_requirements)

Please refer to the Billing and Other Referral Information tab for details on the precertification requirements related to this approved referral and Veteran.

Authority

Apply Update

4. A list will open that will show the services available on the SEOC and the quantity limit.

HealthShare Referral Manager DEMO R19\_USXX\_ADHOC7\_B13

Community Provider

ONE Veteran 01/01/1900 119 Yrs Male 000 MAPLE LANE

Procedural Overview

Cardiology Comprehensive SEOC 1.0.3

SEOC Service

SEOC Service	Quantity Limit	Quantity Consumed
Initial outpatient evaluation and treatment for the referred condition - Cardiology Comprehensive	999	
Diagnostic imaging relevant to the referred condition on the consult - Cardiology Comprehensive	999	
Diagnostic studies relevant to the referred condition on the consult - Cardiology Comprehensive	999	
labs and pathology relevant to the referred condition on the consult **	999	
One cardiac catheterization with PCI interventions and overnight observation if required	999	
Pre-procedure medical and cardiac clearance as indicated, to include H+P/labs, EKG, CXR	999	
Anesthesia consultation related to the procedure - Cardiology Comprehensive	999	
Procedures to include A-fib ablations, implantation of cardiac devices and emergent or urgent surgical interventions such as: cardiac bypass, TAVR, LVAD, angioplasty	999	
Inpatient emergent admission post-catheterization for medical/surgical procedure (e.g. CABG) if required including necessary follow up visits in the global period. **VA notification is required if emergent procedure is	999	
Follow-up visits for this episode of care - Cardiology Comprehensive	999	