

VA operates the nation's largest integrated health care system with more than 1,400 sites of care, including hospitals, community clinics, community living centers, domiciliary, readjustment counseling centers, and various other facilities.

Basic Eligibility

A person who served in the active military, naval, or air service and who was discharged or released under conditions other than dishonorable may qualify for VA health care benefits. Reservists and National Guard members may also qualify for VA health care benefits if they were called to active duty (other than for training only) by a Federal order and completed the full period for which they were called or ordered to active duty.

Minimum Duty Requirements: Veterans who enlisted after Sept. 7, 1980, or who entered active duty after Oct. 16, 1981, must have served 24 continuous months or the full period for which they were called to active duty in order to be eligible. This minimum duty requirement may not apply to veterans discharged for hardship, early out or a disability incurred or aggravated in the line of duty.

Enrollment

For most veterans, entry into the VA health care system begins by applying for enrollment. To apply, complete VA Form 10-10EZ, Application for Health Benefits, which may be obtained from any VA health care facility or regional benefits office, on line at www.1010ez.med.va.gov/sec/vha/1010ez/ or by calling 1-877-222-VETS (8387). Once enrolled, veterans can receive health care at VA health care facilities anywhere in the country.

Veterans enrolled in the VA health care system are afforded privacy rights under federal law. VA's Notice of Privacy Practices, which describes how VA may use and disclose veterans' medical information, is also available on line at www.va.gov/vhapublications/viewpublication.asp?pub_ID=1089

The following four categories of veterans are not required to enroll, but are urged to do so to permit better planning of health resources:

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1. Veterans with a service-connected disability of 50 percent or more.
2. Veterans seeking care for a disability the military determined was incurred or aggravated in the line of duty, but which VA has not yet rated, within 12 months of discharge.
3. Veterans seeking care for a service-connected disability only.
4. Veterans seeking registry examinations (Ionizing Radiation, Agent Orange, Gulf War/Operation Iraqi Freedom and Depleted Uranium).

Priority Groups

During enrollment, each veteran is assigned to a priority group. VA uses priority groups to balance demand for VA health care enrollment with resources. Changes in available resources may reduce the number of priority groups VA can enroll. If this occurs, VA will publicize the changes and notify affected enrollees. A description of priority groups follows:

Group 1: Veterans with service-connected disabilities rated 50 percent or more and/or veterans determined by VA to be unemployable due to service-connected conditions.

Group 2: Veterans with service-connected disabilities rated 30 or 40 percent.

Group 3: Veterans with service-connected disabilities rated 10 and 20 percent; veterans who are former Prisoners of War (POW) or were awarded a Purple Heart medal; veterans awarded special eligibility for disabilities incurred in treatment or participation in a VA Vocational Rehabilitation program; and veterans whose discharge was for a disability incurred or aggravated in the line of duty.

Group 4: Veterans receiving aid and attendance or housebound benefits and/or veterans determined by VA to be catastrophically disabled.

Group 5: Veterans receiving VA pension benefits or eligible for Medicaid programs, and non service-connected veterans and non-compensable, zero percent service-connected veterans whose gross annual household income and/or net worth are below the VA national income threshold and geographically-adjusted income threshold for their resident area.

Group 6: Veterans of World War I; veterans seeking care solely for certain conditions associated with exposure to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki; for any illness associated with participation in tests conducted by the Department of Defense (DoD) as part of Project 112/Project SHAD; veterans with zero percent service-connected disabilities who are receiving disability compensation benefits and veterans who served in a theater of combat operations after Nov. 11, 1998 as follows:

1. Veterans discharged from active duty on or after Jan. 28, 2003, who were enrolled as of Jan. 28, 2008 and veterans who apply for enrollment after Jan. 28, 2008, for 5 years post discharge
2. Veterans discharged from active duty before Jan. 28, 2003, who apply for enrollment after Jan. 28, 2008, until Jan. 27, 2011

Group 7: Veterans with gross household income below the geographically-adjusted income threshold (GMT) for their resident location and who agree to pay copays.

Group 8: Veterans with gross household income and/or net worth above the VA national income threshold and the geographic income threshold who agree to pay copays.

Note: Due to income relaxation rules implemented on June 15, 2009 Veterans with household income above the VA national threshold or the GMT income threshold for their resident location by 10 percent or less, who agree to pay copays, are eligible for enrollment in Priority Group 8.

The GMT thresholds can be located at: <http://www.va.gov/healtheligibility/library/pubs/gmtincomethresholds>

Recently Discharged Combat Veterans

Veterans, including activated reservists and members of the National Guard, are eligible for the enhanced "Combat Veteran" benefits if they served on active duty in a theater of combat operations after November 11, 1998, and have been discharged under other than dishonorable conditions.

Effective Jan. 28, 2008, combat veterans discharged from active duty on or after Jan. 28, 2003, are eligible for enhanced enrollment placement into Priority Group 6 (unless eligible for higher enrollment Priority Group placement) for five-years post discharge.

Veterans with combat service after Nov. 11, 1998, who were discharged from active duty before Jan. 28, 2003, and who apply for enrollment on or after Jan. 28, 2008, are eligible for this enhanced enrollment benefit through Jan. 27, 2011. During this period of enhanced enrollment benefits, these veterans receive VA care and medications at no cost for any condition that may be related to their combat service.

Veterans who enroll with VA under this "Combat Veteran" authority will retain enrollment eligibility even after their five-year post discharge period ends. At the end of their post discharge period, VA will reassess the Veteran's information (including all applicable eligibility factors) and make a new enrollment decision. For additional information, call 1-877-222-VETS (8387).

Special Access to Care

Service-Disabled Veterans: who are 50 percent or more disabled from service-connected conditions, unemployable due to service-connected conditions, or receiving care for a service-connected disability receive priority in scheduling of hospital or outpatient medical appointments.

Women Veterans

Women veterans are eligible for the same VA benefits as male veterans. Comprehensive health services are available to women veterans including primary care, specialty care, mental health care and reproductive health care services.

VA provides management of acute and chronic illnesses, preventive care, contraceptive services, menopause management, and cancer screenings, including pap smear and mammograms, and gynecology. Maternity care is covered in the Medical Benefits package and referrals are made to appropriate clinicians in the community for services that VA is unable to provide. Infertility evaluation and limited treatments are also available. For information, visit www.publichealth.va.gov/womenshealth

Women Veterans Program Managers are available at all VA facilities. See the facility locator at www2.va.gov/directory/guide/home.asp?isFlash=1 to help veterans seeking treatment and benefits. For additional information, visit

www.publichealth.va.gov/womenshealth/

Sexual Trauma

VA health care professionals provide counseling and treatment to help veterans overcome psychological issues resulting from sexual trauma that occurred while serving on active duty, or active duty for training if service was in the National Guard or Reserves. Veterans who are not otherwise eligible for VA health care may still receive these services. Appropriate services are provided for any injury, illness or psychological condition resulting from such trauma. For additional information visit: www.ptsd.va.gov/public/index.asp

Financial Assessment

Most veterans not receiving VA disability compensation or pension payments must provide information on their gross annual household income and net worth to determine whether they are below the annually adjusted financial thresholds. Veterans who decline to disclose their information or have income above the thresholds must agree to pay copays in order to receive certain health benefits, effectively placing them in Priority Group 8. VA is currently not enrolling new applicants who decline to provide financial information unless they have a special eligibility factor.

This financial assessment includes all household income and net worth, including Social Security, retirement pay, unemployment insurance, interest and dividends, workers' compensation, black lung benefits and any other income. Also considered are assets such as the market value of property that is not the primary residence, stocks, bonds, notes, individual retirement accounts, bank deposits, savings accounts and cash.

VA also compares veterans' financial assessment with geographically based income thresholds. If the veteran's gross annual household income is above VA's national means test threshold and below VA's geographic means test threshold, or is below both the VA national threshold and the VA geographically based threshold, but their gross annual household income plus net worth exceeds VA's ceiling (currently \$80,000) the veteran may be eligible for Priority

Group 7 placement and qualify for an 80-percent reduction in inpatient copay rates.

VA Medical Services and Medication Copays

Some veterans are required to make copays to receive VA health care and/or medications.

Inpatient Care: Priority Group 7 and certain other veterans are responsible for paying 20 percent of VA's inpatient copay or \$213.60 for the first 90 days of inpatient hospital care during any 365-day period. For each additional 90 days, the charge is \$106.80. In addition, there is a \$2 per diem charge.

Priority Group 8 and certain other veterans are responsible for VA's inpatient copay of \$1,100 for the first 90 days of care during any 365-day period. For each additional 90 days, the charge is \$550. In addition, there is a \$10 per diem charge.

Extended Care: For extended care services, veterans may be subject to a copay determined by information supplied by completing a VA Form 10-10EC. VA social workers can help veterans interpret their eligibility and copay requirements. The copay amount is based on each veteran's financial situation and is determined upon application for extended care services and will range from \$0 to \$97 a day.

Outpatient Care: A three-tiered copay system is used for all outpatient services. The copay is \$15 for a primary care visit and \$50 for some specialized care. Service-connected Veterans 10 percent or greater are exempt from copay requirements for inpatient and outpatient medical care for service-connected and non-service connected treatment. 0 percent service-connected Veterans may be required to complete a copay test to determine if copay requirements are advised.

Outpatient Visits Not Requiring Copays: Certain services are not charged a copay. Copays do not apply to publicly announced VA health fairs or outpatient visits solely for preventive screening and/or vaccinations, such as vaccinations for influenza and pneumococcal, or screening for hypertension, hepatitis C, tobacco, alcohol, hyperlipidemia, breast cancer, cervical cancer, colorectal cancer by fecal occult blood testing, education about the risks and benefits of prostate cancer screening, HIV testing and counseling, and weight reduction or smoking

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cessation counseling (individual and group). Laboratory, flat film radiology, electrocardiograms, and hospice care are also exempt from copays. While hepatitis C screening and HIV testing and counseling are exempt, medical care for HIV and hepatitis C are NOT exempt from copays.

Medication: Many non-service connected veterans are charged \$8 for each 30-day or less supply of medication provided by VA for treatment of non-service connected conditions. For veterans enrolled in Priority Groups 2 through 6, the maximum copay for medications that will be charged in calendar year 2009 is \$960 to 40 percent service-connected Veterans are responsible for paying a copay for non-service connected medications The following groups of veterans are not charged medication copays: veterans with a service-connected disability of 50 percent or more; veterans receiving medication for service-connected conditions; veterans whose annual income does not exceed the maximum annual rate of the VA pension; veterans enrolled in Priority Group 6 who receive medication under their special authority; veterans receiving medication for conditions related to sexual trauma related to service on active duty; certain veterans receiving medication for treatment of cancer of the head or neck; veterans receiving medication for a VA-approved research project; and former POWs.

NOTE: Copays apply to prescription and over-the-counter medications, such as aspirin, cough syrup or vitamins, dispensed by a VA pharmacy. However, veterans may prefer to purchase over-the-counter drugs, such as aspirin or vitamins, at a local pharmacy rather than making the copay. Copays are not charged for medications injected during the course of treatment or for medical supplies, such as syringes or alcohol wipes.

HSA/HRA: Health Savings Accounts (HSA) cannot be utilized to make VA copays. In addition, if the Veteran receives any health benefits from the VA or one of its facilities, including prescription drugs, in the last three months, he/she will not be eligible for an HSA. Health Reimbursement Arrangements (HRA) is not considered health plans and third party payers cannot be billed.

Private Health Insurance Billing

VA is required to bill private health insurance providers for medical care, supplies and prescriptions provided for treatment of veterans' non-service-connected conditions. Generally, VA cannot bill Medicare, but can bill Medicare supplemental health insurance for covered services. VA is not authorized to bill a High Deductible Health Plan (which is usually linked to a Health Savings Account).

All veterans applying for VA medical care are required to provide information on their health insurance coverage, including coverage provided under policies of their spouses. Veterans are not responsible for paying any remaining balance of VA's insurance claim not paid or covered by their health insurance, and any payment received by VA may be used to offset "dollar for dollar" a veteran's VA copay responsibility.

Reimbursement of Travel Costs

Certain veterans may be provided special mode travel (e.g. wheelchair van, ambulance) or reimbursed for travel costs when traveling for approved VA medical care. Reimbursement is paid at 41.5 cents per mile and is subject to a deductible of \$3 for each one-way trip and \$6 for a round trip; with a maximum deductible of \$18 or the amount after six one-way trips (whichever occurs first) per calendar month. Two exceptions to the deductible are travel in relation to a VA compensation or pension examination and travel requiring a special mode of transportation. The deductible may be waived when their imposition would cause a severe financial hardship.

Eligibility: The following are eligible for VA travel:

1. Veterans whose service-connected disabilities are rated 30 percent or more.
2. Veterans traveling for treatment of service-connected conditions.
3. Veterans who receive a VA pension.
4. Veterans traveling for scheduled compensation or pension examinations.
5. Veterans whose gross household income does not exceed the maximum annual VA pension rate.
6. Certain veterans in certain emergency situations.
7. Veterans whose medical condition requires a special mode of transportation, if they are unable to defray the costs and travel is pre-authorized. Advance authorization is not required in an emergency if a delay would be hazardous to life or health.
8. Certain non-veterans when related to care of a veteran (attendants & donors).

Beneficiary travel fraud can take money out of the pockets of deserving Veterans. Inappropriate uses of beneficiary travel benefits include: incorrect addresses provided resulting in increase mileage; driving/riding together and making separate claims; and taking no cost transportation, such as DAV, and making claims. Veterans making false statements for beneficiary travel reimbursement may be prosecuted under applicable laws.

Reporting Fraud: Help VA's Secretary ensure integrity by reporting suspected fraud, waste

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or abuse in VA programs or operations.

VAOIG hotline: 1-800-488-8244

E-mail: vaoighotline@va.gov

Fax: (202) 565-7936

VA Inspector General Hotline

P.O. Box 50410

Washington, DC 20091-0410

VA Medical Programs

Veteran Health Registries: Certain veterans can participate in a VA health registry and receive free medical examinations, including laboratory and other diagnostic tests deemed necessary by an examining clinician. VA maintains health registries to provide special health examinations and health-related information. To participate, contact the Environmental Health (EH) Coordinator at the nearest VA health care facility or visit

w.publichealth.va.gov

[/exposures](#)

[WW](#)

, where a directory of EH Coordinators is maintained.

Gulf War Registry: For veterans who served on active military duty in Southwest Asia during the Gulf War, which began in 1990 and continues to the present, including Operation Iraqi Freedom (OIF). The Gulf War examination registry was established after the first Gulf War to identify possible diseases resulting from U.S. military personnel service in certain areas of Southwest Asia. These diseases were endemic to the area or may have been due to hazardous exposures, including heavy metals. Furthermore, air pollutants, i.e., carbon monoxide sulfur oxides, hydrocarbons, particulate matter, and nitrogen oxides, singly or in combination, could have caused chronic health problems.

Depleted Uranium Registries: Depleted uranium is natural uranium left over after most of the U-235 isotope has been removed, such as that used as fuel in nuclear power plants. DU possesses about 60 percent of the radioactivity of natural uranium; it is a radiation hazard primarily if internalized, such as in shrapnel, contaminated wounds, and inhalation. In addition to its radioactivity, DU has some chemical toxicity related to being a heavy metal (similar to lead).

Veterans who are identified by the Department of Defense (DoD) or have concerns about

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possible depleted uranium (DU) exposure are eligible for a DU evaluation. VA maintains two registries for veterans possibly exposed to depleted uranium. The first is for veterans who served in the Gulf War, including Operation Iraqi Freedom. The second is for veterans who served elsewhere, including Bosnia and Afghanistan.

Agent Orange Registry: For veterans possibly exposed to dioxin or other toxic substances in herbicides used during the Vietnam War, between 1962 and 1975, regardless of length of service, or while serving in Korea in 1968 or 1969, or as a result of testing, transporting, or spraying herbicides for military purposes. DoD has provided a list of locations and dates where herbicides, including Agent Orange, were used. This DoD list is available at

www.publichealth.va.gov/exposures

. For those sites not listed, the Vietnam Veteran should provide some proof of exposure to obtain a registry examination.

Ionizing Radiation Registry: For Veterans possibly exposed to and who are concerned about possible adverse effects of their atomic exposure during the following activities -- On-site participation in:

an atmospheric detonation of a nuclear device, whether or not the testing nation was the United States; occupation of Hiroshima or Nagasaki from Aug. 6, 1945, through July 1, 1946; or internment as a POW in Japan during World War II, which the Secretary of Veterans Affairs determines resulted in an opportunity for exposure to ionizing radiation comparable to that of Veterans involved in the occupation of Hiroshima or Nagasaki.

In addition, VA regulations provide that "radiation-risk activity" means service at: Department of Energy gaseous diffusion plants at Paducah, Kentucky, Portsmouth, Ohio, or the K-25 area at Oak Ridge, Tennessee for at least 250 days before Feb. 1, 1992. If the Veteran was monitored for each of the 250 days using dosimetry badges to monitor radiation to external body parts or if the Veteran served for at least 250 days in a position that had exposures comparable to a job that was monitored using dosimetry badges; Longshot, Milrow or Cannikin underground nuclear tests at Amchitka Island, Alaska, before Jan. 1, 1974 or Veterans who received nasopharyngeal (NP) – nose and throat - radium irradiation treatments while in the active military, naval, or air service.

Readjustment Counseling Services

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VA provides outreach and readjustment counseling services through 232 community-based Vet Centers located in all 50 states, the District of Columbia, Guam, Puerto Rico, American Samoa, and the U.S. Virgin Islands.

Eligibility: Veterans are eligible if they served on active duty in a combat theater during World War II, the Korean War, the Vietnam War, the Gulf War, or the campaigns in Lebanon, Grenada, Panama, Somalia, Bosnia, Kosovo, Afghanistan, Iraq and the Global War on Terror. Veterans, who served in the active military during the Vietnam-era, but not in the Republic of Vietnam, must have requested services at a Vet Center before Jan. 1, 2004. Vet Centers do not require enrollment in the VHA Health Care System.

Services Offered: Vet Center counselors provide individual, group, and family readjustment counseling to combat veterans to assist them in making a successful transition from military to civilian life; counseling services treatment for post-traumatic stress disorder (PTSD) and help with any other military related problems that affect functioning within the family, work, school or other areas of everyday life; other psycho-social services include outreach, education, medical referral, homeless veteran services, employment, VA benefit referral, and the brokering of non-VA services. The Vet Centers also provide military sexual trauma counseling to Veterans of both genders and of any era of military service.

Bereavement Counseling related to Servicemembers: Bereavement counseling is available through Department of Veterans Affairs (VA's) Vet Centers to all immediate family members (including spouses, children, parents, and siblings) of servicemembers who die in the line of duty while on active service. This includes federally-activated members of the National Guard and reserve components. Vet Center bereavement services for surviving family members of service members may be accessed by calling (202) 461-6530.

For additional information, contact the nearest Vet Center, listed in the back of this book, or visit www.vetcenter.va.gov/.

Prosthetic and Sensory Aids

Veterans receiving VA care for any condition may receive VA prosthetic appliances, equipment and services, such as home respiratory therapy, artificial limbs, orthopedic braces and therapeutic shoes, wheelchairs, powered mobility, crutches, canes, walkers, and other durable medical equipment and supplies.

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VA will provide hearing aids and eyeglasses to Veterans who receive increased pension based on the need for regular aid and attendance or being permanently housebound; receive compensation for a service-connected disability; are former POWs or a Purple Heart award recipient.

Otherwise, hearing aids and eyeglasses are provided only in special circumstances, and not for normally occurring hearing or vision loss. For additional information, contact the Prosthetic Chief or Representative at the nearest VA health care facility or go to the web site: prosthetics.va.gov

Home Improvements and Structural Alterations

VA provides up to \$4,100 lifetime benefit for service-connected veterans and up to \$1,200 for non-service-connected veterans to make home improvements necessary for the continuation of treatment or for disability access to the home and essential lavatory and sanitary facilities.

Home Improvement and Structural Alterations grants provide for medically necessary improvements and/or structural changes to the Veteran's residence for the following purposes:

1. Allowing entrance to, or exit from, the Veteran's residence.
2. Use of essential lavatory and sanitary facilities.
3. Allowing accessibility to kitchen or bathroom sinks or counters.
4. Improving entrance paths or driveways in immediate area of the home to facilitate access to the home by the Veteran.
5. Improving plumbing or electrical systems made necessary due to installation of dialysis equipment in the home.

For application information, contact the prosthetic representative at the nearest VA health care facility.

Special Eligibility Programs

Special Eligibility for Children with Spina Bifida: VA provides needed health care benefits, including prosthetics, medical equipment, and supplies to certain children of Vietnam Veteran,

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i.e., children who are suffering from spina bifida or a disability associated with such condition.

Special Eligibility for Veterans Participating in Vocational Rehabilitation: Veterans participating in VA's vocational rehabilitation program may receive VA health care benefits including prosthetics, medical equipment, and supplies.

Limitations on Benefits Available to Veterans outside the U.S.: Veterans outside the U.S. are eligible for prosthetics, medical equipment, and supplies only for a Service-connected disability.

Services for Blind and Visually Impaired Veterans

Blind veterans may be eligible for services at a VA medical center or for admission to an inpatient or outpatient VA blind rehabilitation program. In addition, blind veterans enrolled in the VA health care system may receive:

1. A total health and benefits review as well as counseling on obtaining benefits that may be due to the veteran but have not been received.
2. Adjustment to blindness training and counseling.
3. Home improvements and structural alterations.
4. Specially adapted housing and adaptations.
5. Automobile grant.
6. Rehabilitation assessment and training to improve independence and quality of life.
7. Low-vision devices and training in their use.
8. Electronic and mechanical aids for the blind, including adaptive computers and computer-assisted devices such as reading machines and electronic travel aids.
9. Facilitation and recommendation for guide dogs and training in the use of guide dogs.
10. Costs for veterinary care and equipment for guide dogs.
11. Talking books, tapes and Braille literature.
12. Family support.

Eligible visually impaired veterans (who are not blind) enrolled in the VA health care system may be eligible for services at a VA medical center or for admission to an outpatient VA blind rehabilitation program and may also receive:

1. A total health and benefits review.

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2. Adjustment to vision loss counseling.
3. Rehabilitation assessment and training to improve independence and quality of life.
4. Low-vision devices and training in their use.
5. Electronic and mechanical aids for the visually impaired, including adaptive computers and computer-assisted devices, such as reading machines and electronic travel aids, and training in their use.
6. Family support.

Mental Health Care Treatment

Veterans eligible for VA medical care may apply for general mental health treatment including specialty services. Mental health services are available in specialty clinics, primary care clinics, nursing homes, and residential care facilities where veterans receive health care.

Specialized programs, such as mental health intensive case management, day centers, work programs and psychosocial rehabilitation are provided for those with serious mental health problems.

The list of services and programs that Mental Health supports include: inpatient care, residential care, outpatient mental health care, homeless programs, programs for incarcerated veterans, specialized PTSD services, military sexual trauma, psychosocial rehabilitation & recovery services, substance use disorders, suicide programs, geriatrics, violence prevention, evidence-based psychotherapy programs, mental health disaster response/post deployment activities

For more information on VA Mental Health services visit http://www.mentalhealth.va.gov/VA_MentalHealthGroup.asp

Suicide Prevention Lifeline

Veterans experiencing an emotional distress/crisis or who need to talk to a trained mental health professional may call the National Suicide Prevention Lifeline toll-free lifeline number, 1-800-273-TALK (8255). The hotline is available 24 hours a day, seven days a week. Callers are immediately connected with a qualified and caring provider who can help.

On July 3, 2009, the VA launched a pilot on-line Chat Service, in partnership with Lifeline. The Veterans Chat Service is located at the VA National Suicide Prevention Hotline Veterans Chat enables Veterans, their families and friends to go online where they can anonymously chat with a trained VA counselor. Veterans Chat can be accessed through the suicide prevention Web site www.suicidepreventionlifeline.org . by clicking on the Veterans Chat tab on the right side of the Web page.

Work Restoration Programs

VA provides vocational assistance and therapeutic work opportunities through several programs for veterans receiving VA health care. Each program offers treatment and rehabilitation services to help veterans live and work in their communities.

Participation in the following VA Work Restoration Programs cannot be used to deny or discontinue VA compensation or pension benefits. Payments received from Incentive Therapy and Compensated Work Therapy transitional work are not taxable.

Incentive Therapy (IT) provides a diversified work experience at VA medical centers for Veterans who exhibit severe mental illness and/or physical impairments. IT services may consist of full or part time work with nominal remuneration limited to the maximum of one half of the Federal minimum wage.

CWT/ Sheltered Workshop (CWT) operates sheltered workshops at approximately 35 VA Medical Centers. CWT sheltered work shop is a pre-employment vocational activity that provides an opportunity for work hardening and assessment in a simulated work environment. Participating Veterans are paid on a piece rate basis.

CWT/Transitional Work (CWT/TW) is vocational assessment program that operates in VA medical centers and/or local community business and industry. CWT/TW participants are matched to real life work assignments for a time limited basis. Veterans are supervised by personnel of the sponsoring site, under the same job expectations experienced by non-CWT workers. CWT/TW participants are not considered employees and receive no traditional employee benefits.

Participants receive the greater of Federal or state minimum wage, or more depending on the type of work. Over forty percent of participants secure competitive employment at the time of discharge.

CWT/Supported Employment (CWT/SE) consists of full-time or part-time competitive employment with extensive clinical supports. The focus of CWT/SE is to assist Veterans with psychosis and other serious mental illness gain access to meaningful competitive employment. CWT/SE follow along support services are generally phased out after the Veteran is able to maintain employment independently.

Mental Health Residential Rehabilitation Treatment Program

Mental Health Residential Rehabilitation Treatment Programs (MH RRTP) (including Domiciliary RRTPs) provides residential rehabilitative and clinical care to Veterans who have a wide range of problems, illnesses, or rehabilitative care needs which can be medical, psychiatric, substance use, homelessness, vocational, educational, or social.

The MH RRTP provides a 24-hour therapeutic setting utilizing a milieu of peer and professional support. The programs provide a strong emphasis on psychosocial rehabilitation and recovery services that instill personal responsibility to achieve optimal levels of independence upon discharge to independent or supportive community living. MH RRTP also provides rehabilitative care for veterans who are homeless.

Eligibility: VA may provide domiciliary care to veterans whose annual gross household income does not exceed the maximum annual rate of VA pension or to veterans the Secretary of Veterans Affairs determines have no adequate means of support.

The copays for extended care services apply to domiciliary care. Call your nearest benefits or health care facility to obtain the latest information.

Outpatient Dental Treatment

Veterans are eligible for outpatient dental treatment if they meet one of the following criteria:

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If you:

You are eligible for:

Have a service-connected compensable dental disability or condition

Any needed dental care

Are a former prisoner of war

Any needed dental care

Have service-connected disabilities rated 100% disabling or are unemployable due to service-connected disabilities

Any needed dental care

Are participating in a VA vocational rehabilitation program

Dental care needed to complete the program

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Have a service-connected and/or noncompensable dental condition or disability that existed at the time of separation from active duty

One-time dental care if you apply for dental care within 180 days of separation from active duty and you have a service-connected condition

Have a service-connected noncompensable dental condition or disability resulting from combat wounds or military occupational stress

You are eligible for needed care for the service-connected condition(s)

You have a dental condition clinically determined by VA to be currently aggravating a service-connected condition

You are eligible for dental care to resolve the problem

You have are receiving outpatient care or scheduled for inpatient care and require dental care for a service-connected condition

You are eligible for dental care to resolve the problem

Certain veterans enrolled in VA Homeless Program for 60 consecutive days or more

May receive basic outpatient dental services

For more information about eligibility for VA medical and dental benefits, contact the Health Benefits Service Center at 1-877-222-8387 or www.va.gov/healtheligibility/Library/pubs/Dental/Dental.pdf

Nursing Home Care

VA provides nursing home services to veterans through three national programs: VA owned and operated Community Living Centers (CLC), state veterans' homes owned and operated by the states, and the contract community nursing home program. Each program has admission and eligibility criteria specific to the program.

VA Community Living Centers: Community Living Centers (CLC) provide a dynamic array of short stay (less than 90 days) and long stay (91 days or more) services. Short stay services include but are not limited to skilled nursing, respite care, rehabilitation, hospice, and maintenance care for veterans awaiting placement in the community. Short stay services are available for veterans who are enrolled in VA health care and require CLC services. Long stay services are available for enrolled veterans who need nursing home care for life or for an extended period of time for a service-connected disability, and those rated 60 percent service-connected and unemployable; or veterans or who have a 70 percent or greater service-connected disability. All others are based on available resources.

State Veterans' Home Program: State veterans homes are owned and operated by the states. The states petition VA for grant dollars for a portion of the construction costs followed by a request for recognition as a state home. Once recognized, VA pays a portion of the per diem if the state meets VA standards. States establish eligibility criteria and determine services offered for short and long-term care. Specialized services offered are dependent upon the capability of the home to render them.

Contract Community Nursing Home Program: VA health care facilities establish contracts with community nursing homes. The purpose of this program is to meet the nursing home needs of veterans who require long-term nursing home care in their own community, close to their families and meet the enrollment and eligibility requirements.

Admission Criteria: The general criteria for nursing home placement in each of the three programs requires that a resident must be medically stable, i.e. not acutely ill, have sufficient functional deficits to require inpatient nursing home care, and is assessed by an appropriate medical provider to be in need of institutional nursing home care. Furthermore, the veteran must meet the specific eligibility criteria for community living center care or the contract nursing home program and the eligibility criteria for the specific state veterans home.

Non-Institutional Long-term Care Services: In addition to nursing home care, VA offers a variety of other long-term care services either directly or by contract with community-based agencies. Such services include adult day health care, respite care, geriatric evaluation and management, hospice and palliative care, home based skilled nursing, and home based primary care. Veterans receiving these services may be subject to a copay .

Emergency Medical Care in U.S. Non-VA Facilities

In the case of medical emergencies, VA may reimburse or pay for emergency non-VA medical care not previously authorized that is provided to certain eligible Veterans when VA or other federal facilities are not feasibly available. This benefit may be dependent upon other conditions, such as notification to VA, the nature of treatment sought, the status of the Veteran, the presence of other health care insurance, and third party liability. Because there are different regulatory requirements that may affect VA payment and Veteran liability for the cost of care, it is very important that the nearest VA medical facility to where emergency services are furnished be notified as soon as possible after emergency treatment is sought. If emergency inpatient services are required, VA will assist in transferring the Veteran to a Department facility, if available. Claim timely filing limitations apply. For additional information, contact the nearest VA medical facility. Please note that reimbursement criteria for Veterans living or traveling outside the United States fall under VA's Foreign Medical Program (FMP), and differ from the criteria for payment of emergency treatment received in the United States. Please refer to the section below VA's Foreign Medical Program.

Foreign Medical Program

VA will pay for medical services for service-connected disabilities or any disability associated with and found to be aggravating a service-connected disability for those veterans living or traveling outside the United States. This program will also reimburse for the treatment of foreign medical services needed as part of an approved VA vocational rehabilitation program. Veterans living in the Philippines should register with the U.S. Veterans Affairs office in Pasay City, telephone 011-632-838-4566 or by email at manlopc.inqry@vba.va.gov. All other veterans living or planning to travel outside the U.S. should register with the Denver Foreign Medical Program office, P.O. Box 469061, Denver, CO 80246-9061, USA; telephone 303-331-7590. For information visit: www.va.gov/hac/forbeneficiaries/fmp/fmp.asp.

Some veterans traveling or living overseas can telephone the Foreign Medical Program toll free from these countries: Germany 0800-1800-011; Australia 1800-354-965; Italy 800-782-655; United Kingdom (England and Scotland) 0800-032-7425; Mexico 001-877-345-8179; Japan 00531-13-0871; Costa Rica 0800-013-0759; and Spain 900-981-776. (Note: Veterans in Mexico or Costa Rica must first dial the United States country code.)

Online Health Services

My HealtheVet (www.myhealth.va.gov): is VA's award-winning online Personal Health Record. Access is easy and convenient anywhere the Internet is available. My HealtheVet is for Veterans, active duty Service members, their dependents, and caregivers. With My HealtheVet users access trusted and secure VA health information to better manage their health care and facts about other VA benefits and services to which they may be entitled.. My HealtheVet helps users to partner with their health care teams and provides them opportunities and tools to make informed decisions.

To register, simply go to www.myhealth.va.gov and follow the directions. Users can then record and track health information and history for their family and themselves; enter past and present military service events; keep activity and food journals; record, track, and graph vital signs; and, maintain other health measures.

Veterans enrolled at a VA health care facility can also access advanced features of My HealtheVet and can link their Personal Health Record with information from their VA electronic health record. To access the advanced features, Veterans must complete a one-time process called In-Person Authentication or "IPA." This includes making a visit to their VA facility to verify their identity in person. After completing the IPA, VA patients can use My HealtheVet to:

- Refill their VA prescriptions by name, not just by the prescription number
- Record non-VA medications
- Receive VA Wellness Reminders
- Access new features as they become available

Expected in 2010, VA patients who complete the IPA also will see their VA appointments, VA lab test results, and VA list of allergies. They may also communicate with their health care teams through "Secure Messaging" as this feature becomes available at their local VA facility.

VA Health Care Benefits

Written by VBI

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Register for My HealthVet today at www.myhealth.va.gov . If you are a VA patient and want to access advanced features, don't forget to complete the one-time IPA process which takes only a few minutes. Start now and benefit from using My HealthVet. It's quick, easy and it's for you. My HealthVet: 24/7 Access to VA Health Care Services and Information.