

2-02-10 Briefings and Updates

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Updates</subject><comm>JASC26</comm></target>

ALASKA STATE LEGISLATURE

JOINT ARMED SERVICES COMMITTEE

Senator Bill Wielechowski
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907-465-6615 fx



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CO-CHAIRS

SENATOR BILL WIELECHOWSKI

REPRESENTATIVE NANCY DAHLSTROM

To: JASC Committee Members

From: Senator Bill Wielechowski

Date: February 2, 2010

Re: Agenda for February 2, 2010

Agenda

Tuesday, February 2, 2010
11:30am to 1:30pm

Alaska Marines Briefing (10 min)

- *Maj. William B. Allen*, Site Commander, Marines I-I Staff, Company D(-), Anti-Terrorism Battalion

VA Health Care (30 min)

- *Marcia Hoffman-Devo*, Public Affairs Officer, Alaska VA Healthcare System & Regional Office

Education Benefits, ATG, Veterans Summit (30 min)

- *Verdie Bowen*, Veterans Affairs Administrator, AK Dept. of Military and Veterans Affairs

PTA Report (20 min)

- *Paula Pawlowski*, Director, Parent Engagement Program, Alaska PTA

Fisher House (15 min)

- *Senator Charlie Huggins*, Senate District H, Fisher House Board Member

Q&A (15 min)



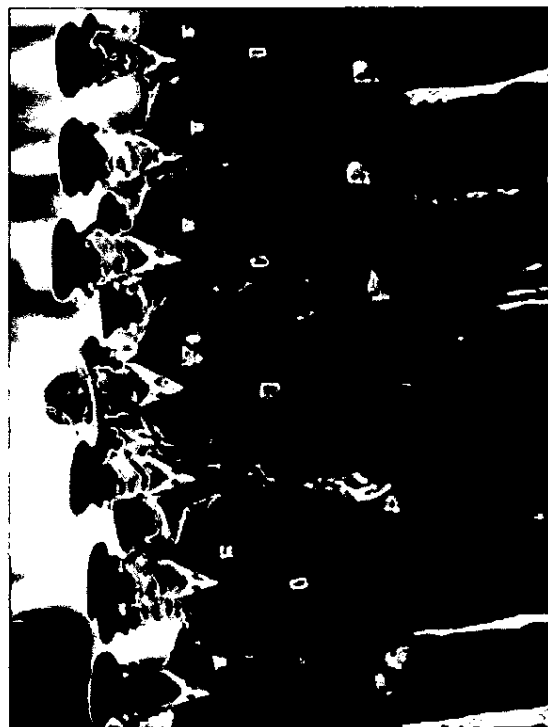
Alaska Marines Brief

2 Feb 2010

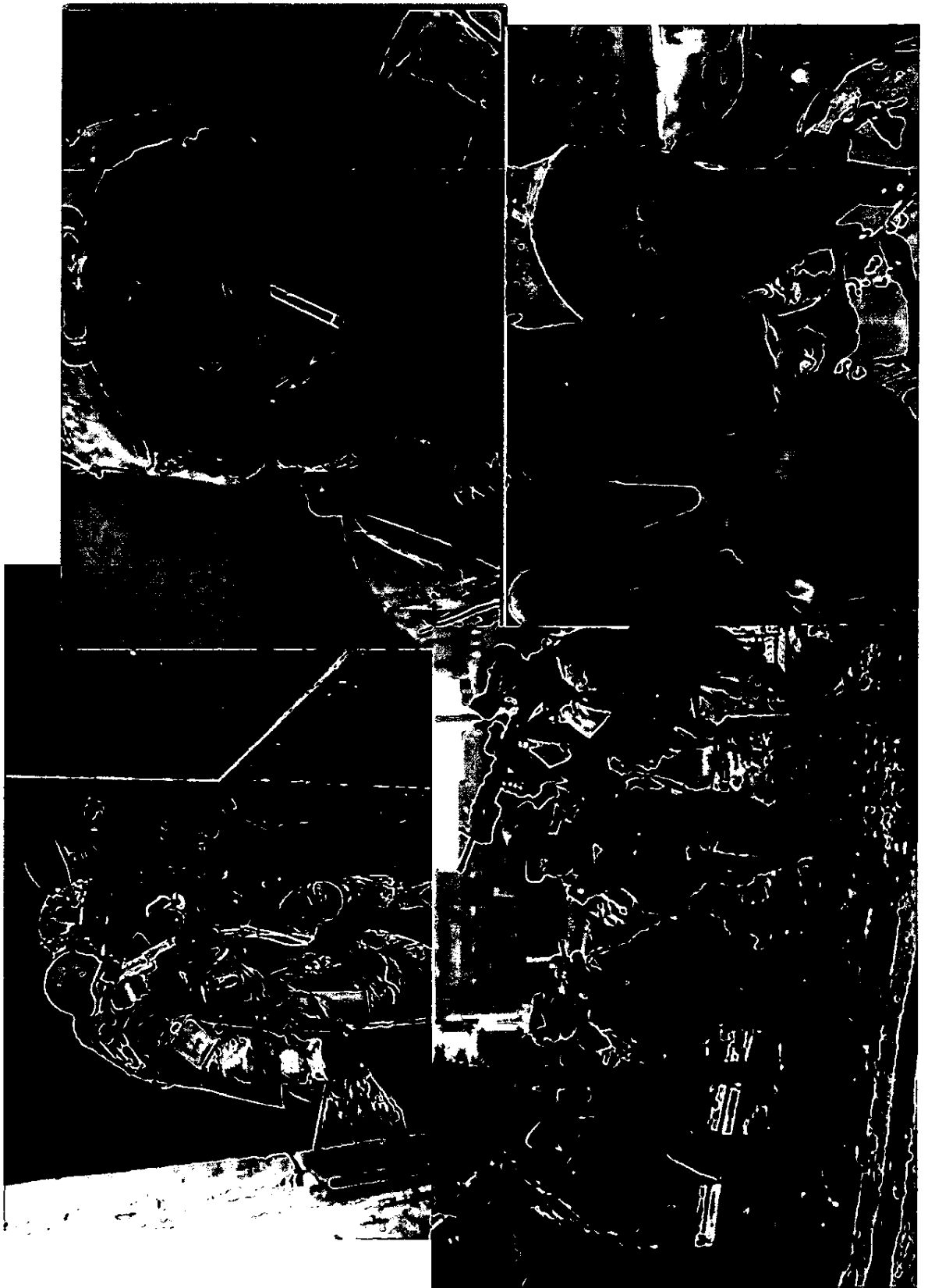
Major W. B. Allen IV
Site Commander

First Sergeant M. Magcale
Command First Sergeant

Today's Marine



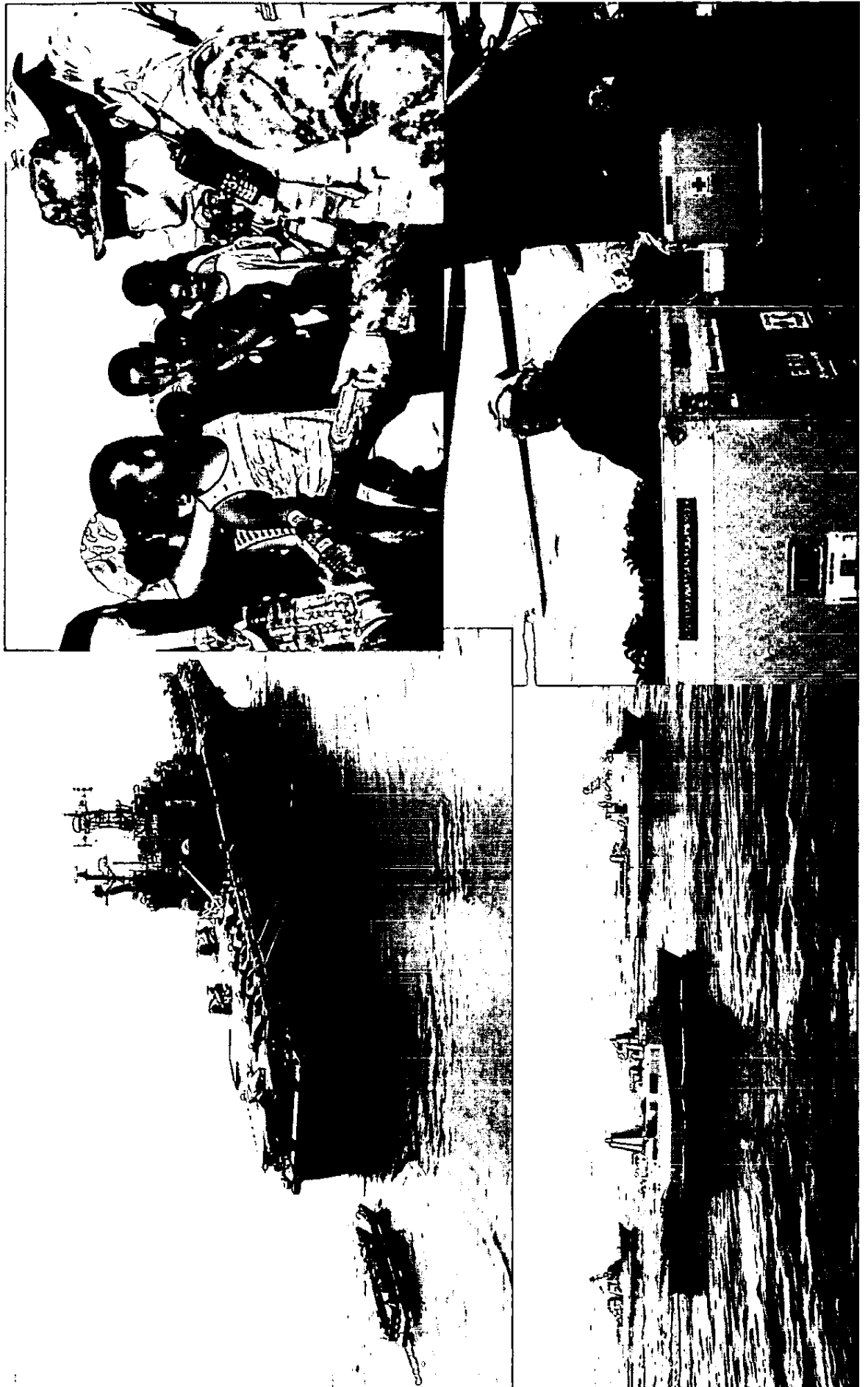
Marines in Iraq



Marines in Afghanistan



Marines in Haiti



Command Relationship

Marine Forces Reserve



4th Marine Division

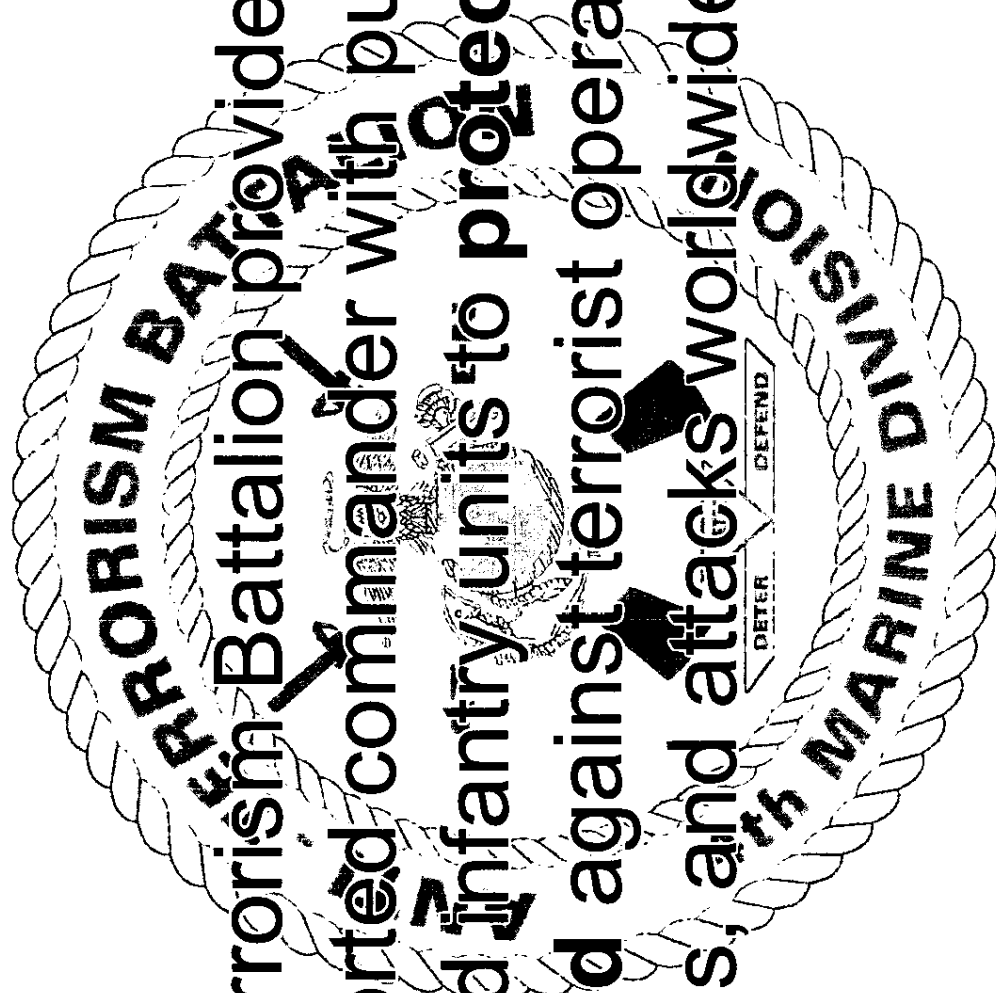


Anti-Terrorism Battalion



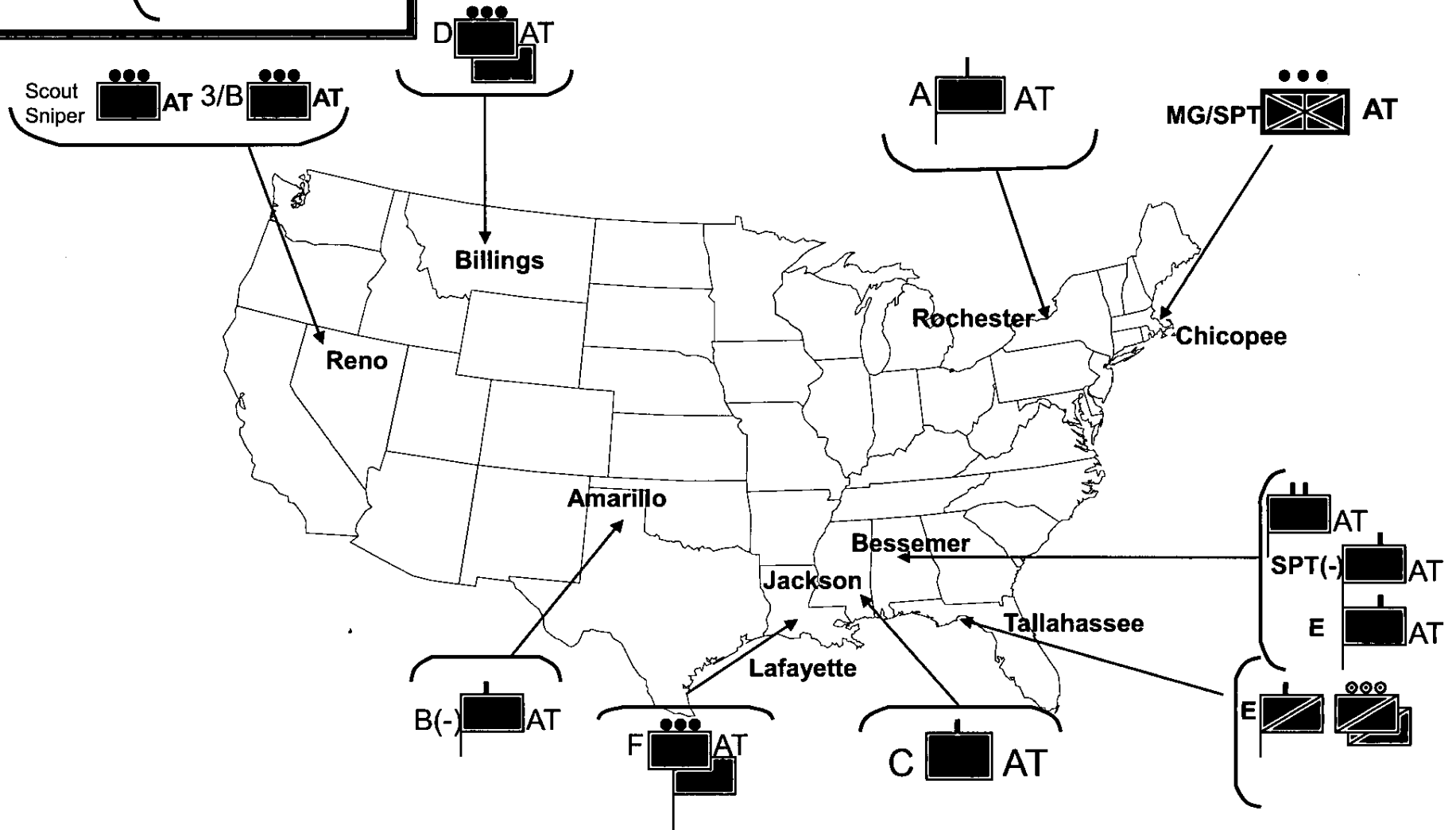
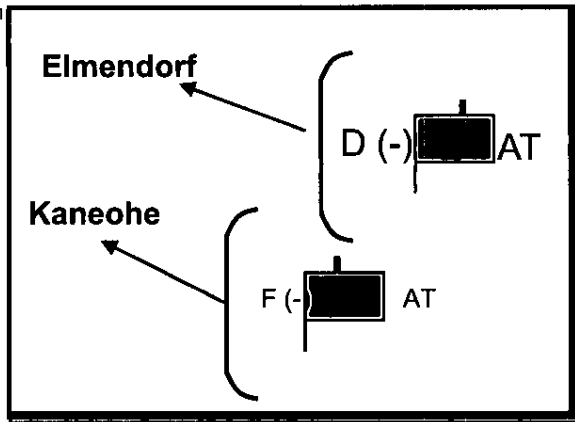
Mission

Anti-Terrorism Battalion provides a supported commander with purpose-trained infantry units to protect and defend against terrorist operations, actions, and attacks worldwide.

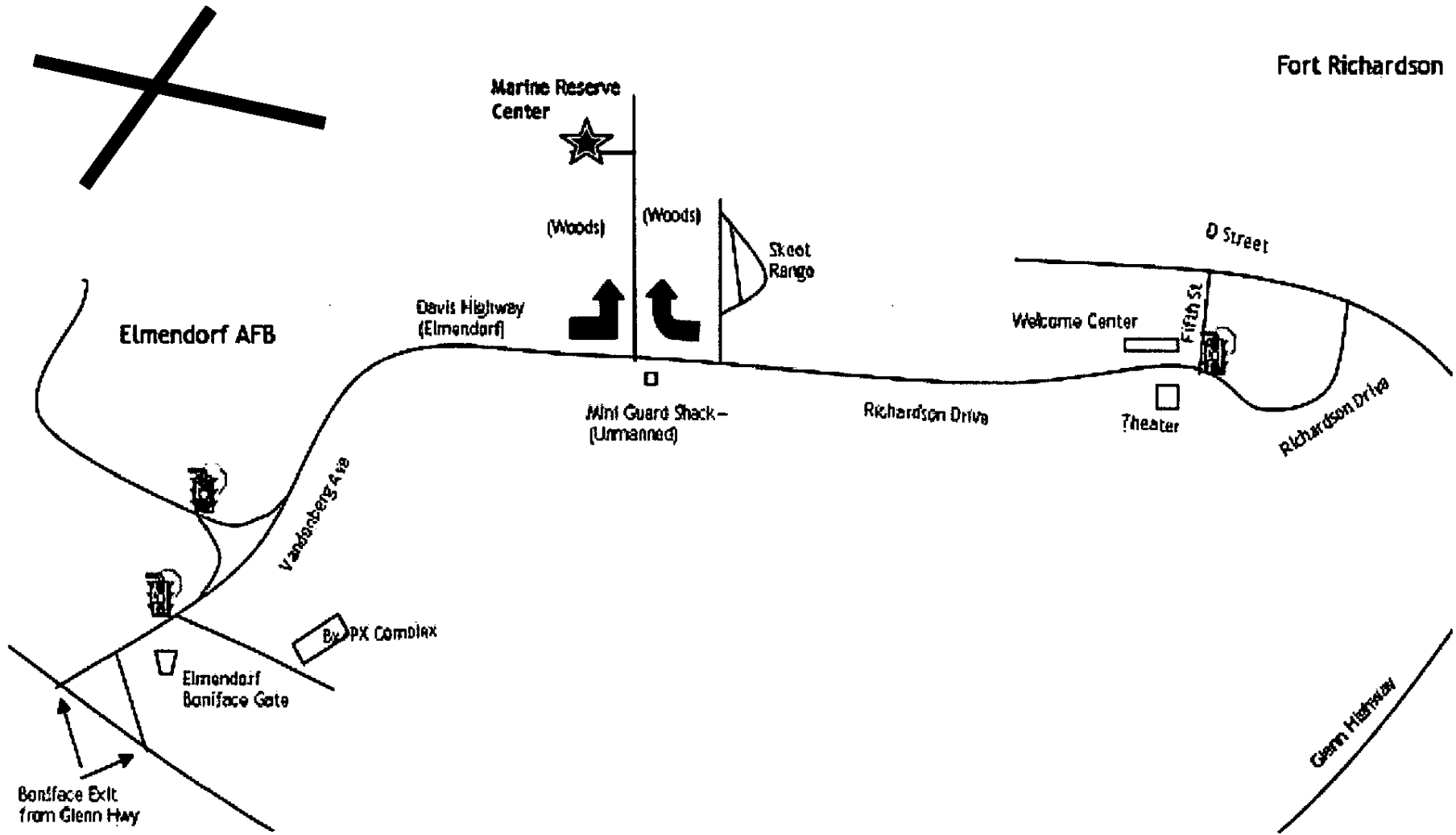


Battalion Overview

Anti-Terrorism Battalion consists of 8 companies (approx.1100 SMCR Marines) drilling from 11 sites in 11 states.



Site Location

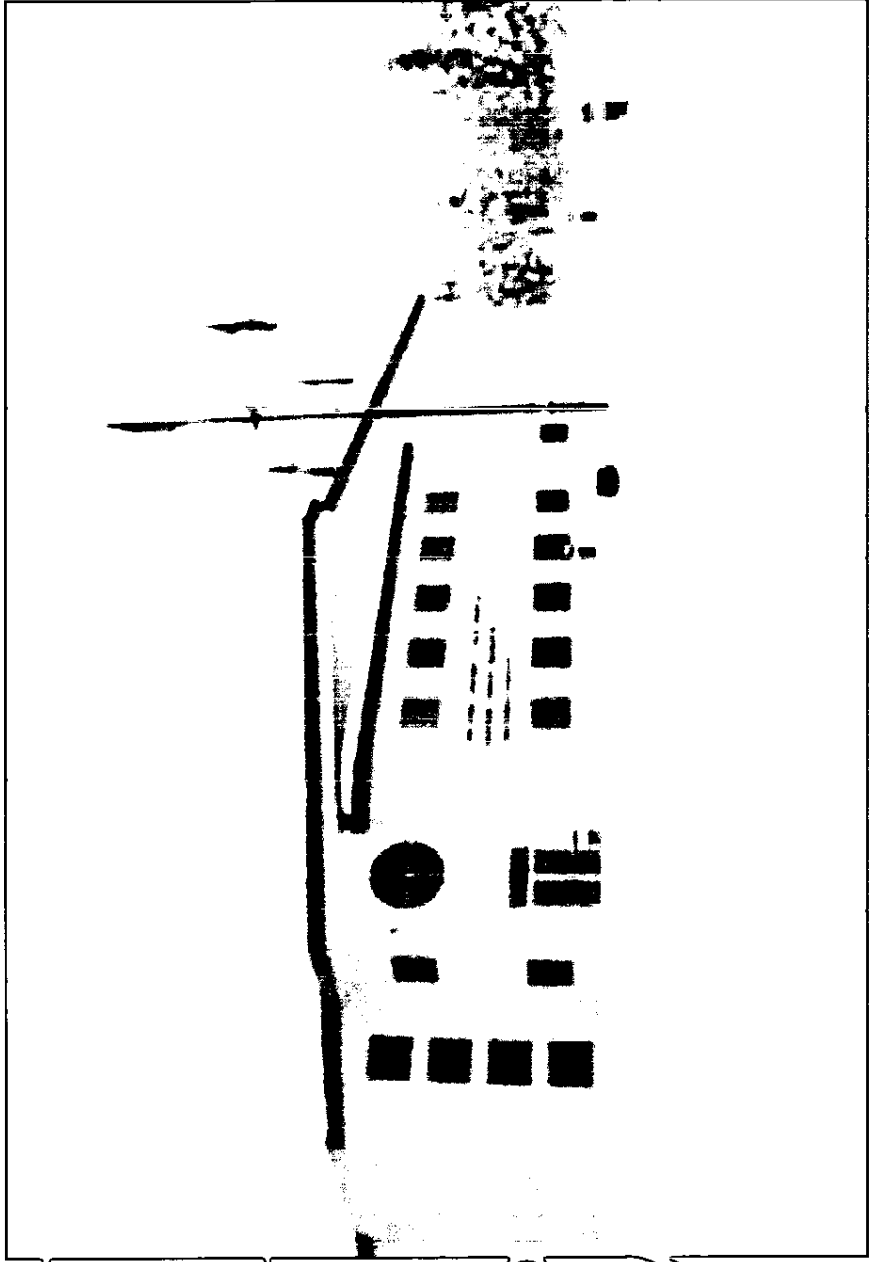


Alaska Marine History

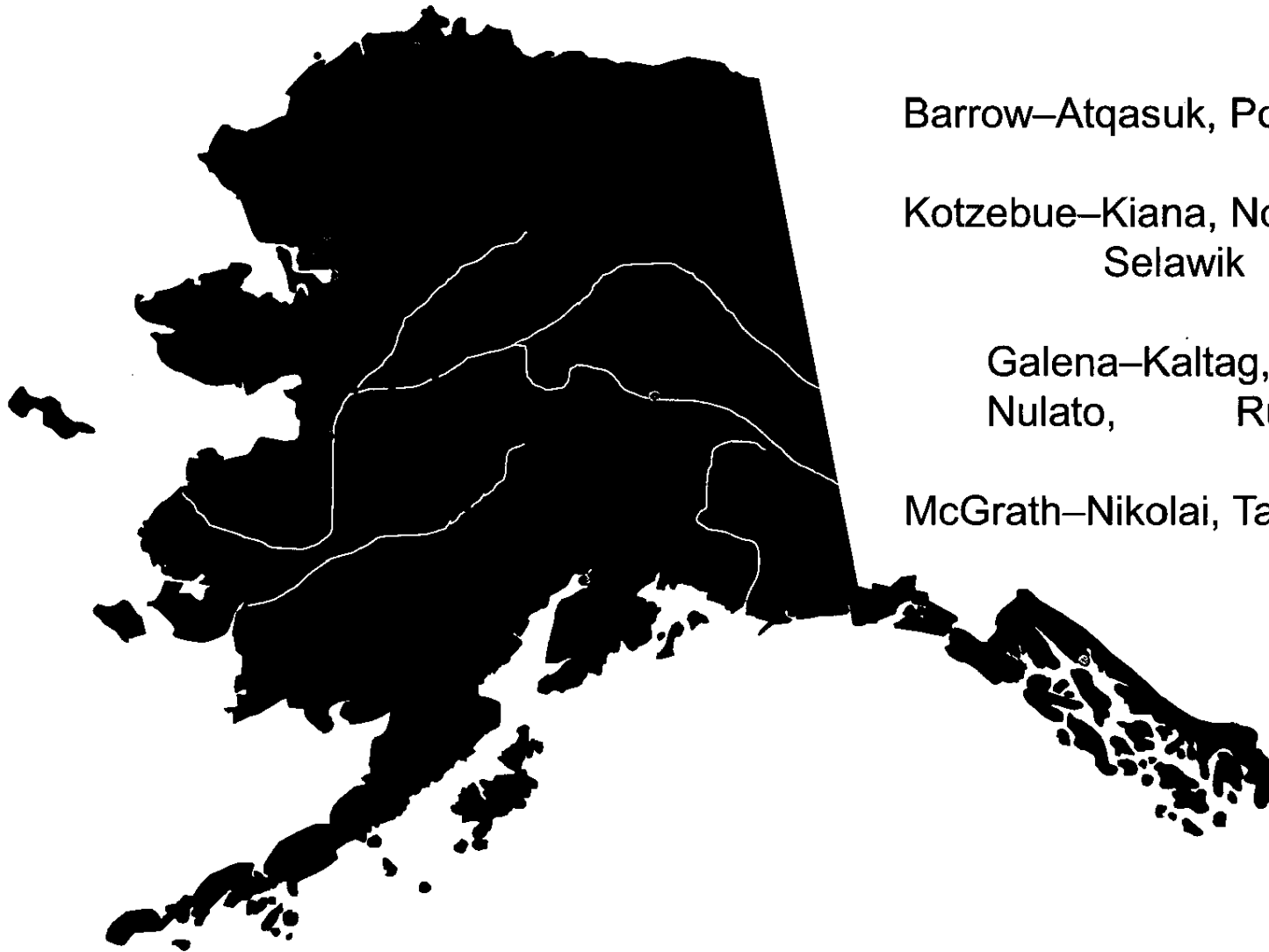
- **1 June 1985 established on EAFB**
- **27 Sept 2006 redesignated**
- **(2) company deployments to Iraq**
- **Multiple Platoon deployments**
- **(3) OIF KIA Marines**

Enduring Tasks

- Weekend Drills and Annual Training
- Administrative Readiness
- Military Fur
- CACO
- Toys for To
- Community



Operation SEMPER FIDELIS



Barrow–Atkasuk, Point Lay

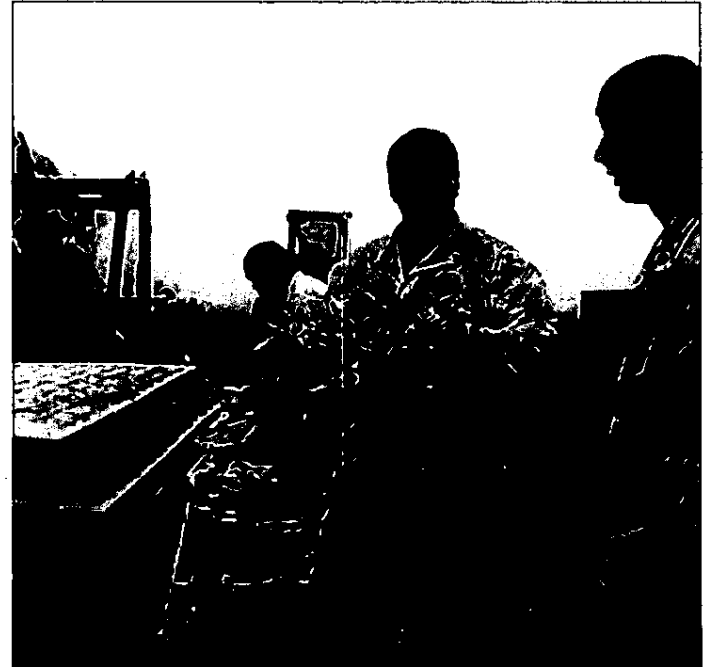
Kotzebue–Kiana, Noorvik,
Selawik

Galena–Kaltag, Koyukuk,
Nulato, Ruby

McGrath–Nikolai, Takotna

USMC IRT Alaska Projects

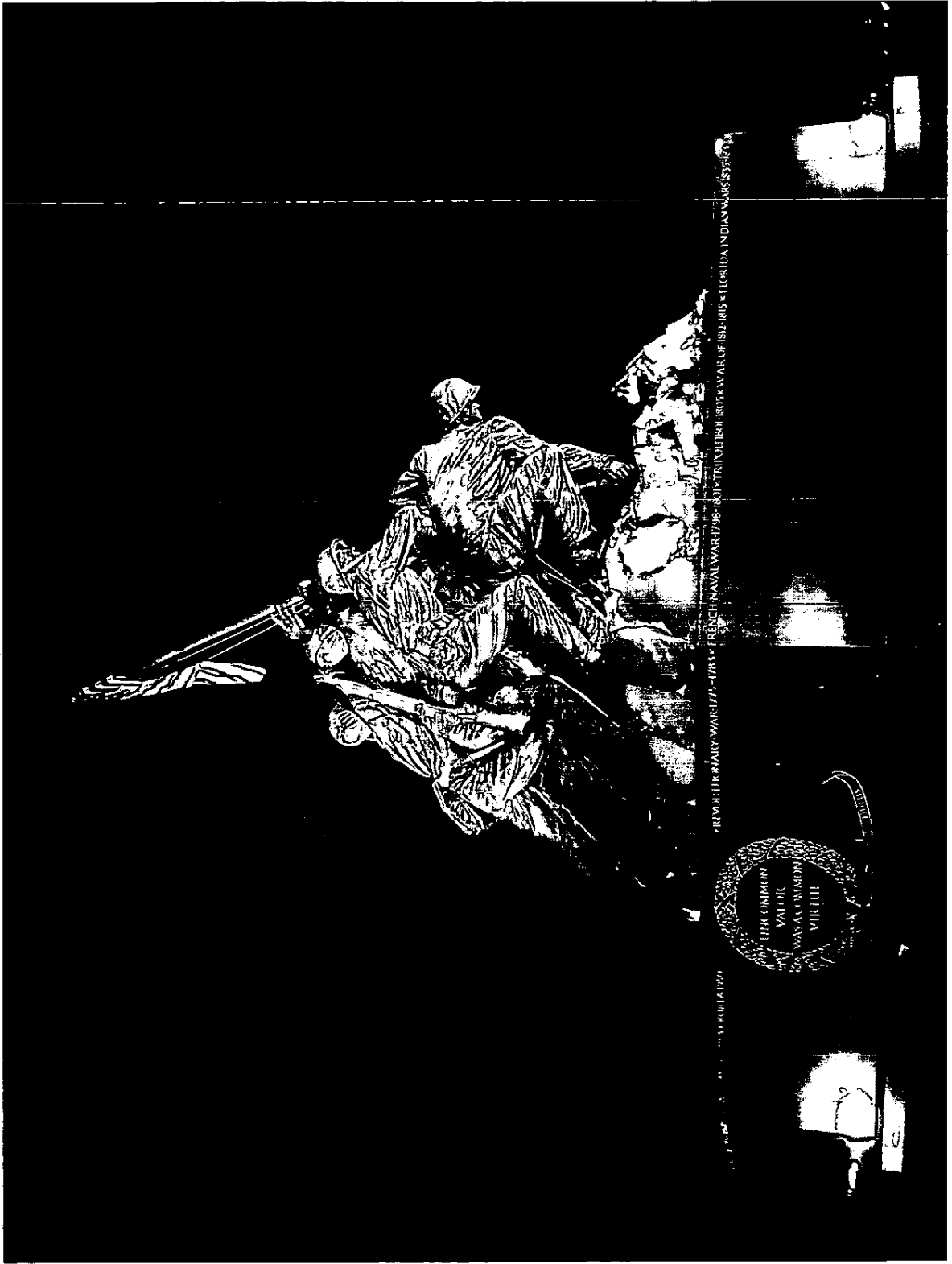
- 1) Relocation of Newtok
- 2) Kotzebue road survey
- 3) Airfield survey and catalog



Future Events

- Change of Command Ceremony
- Annual Training Exercise
- Marine Corps Birthday Ball
- Toys For Tots Campaign

Questions



Alaska
Healthcare System
& Regional Office



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Alaska State Legislature *Joint Armed Services Committee*

February 2, 2010





TOPICS

- Who We Are
- Eligibility
- Demographics
- Sites of Care
- Healthcare Delivery System
- Serving OEF/OIF Veterans
- Rural Health Care



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Department of Veteran Affairs 3 Administrations

Veterans Health Administration (VHA)

Alex Spector, Director

Alaska VA Healthcare System
Anchorage, AK

Veterans Benefit Administration (VBA)

Mark Bilosz, Director

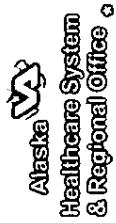
Regional Offices for Anchorage, AK
Ft. Harrison, MT and Salt Lake City, UT

Patrick Kelley
VBA Service Center
Manager - Anchorage, AK

National Cemetery Administration (NCA)

☆ Virginia Walker, Director

☆ Fort Richardson and Sitka, AK



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Other Department of Veterans Affairs Services in Alaska

- Vet Centers
 - Report to Regional Director based in Denver, CO
 - Anchorage – Bob Erwin, Teamleader
 - Fairbanks – Heidi Mattson, Teamleader
 - Kenai – Bob Erwin, Teamleader
 - Wasilla – Steve Sweet, Teamleader

Basic Eligibility for VA Medical Care

- **Honorably discharged from Active Military Duty (if enlisted after September 8, 1980 must have served 24 consecutive months).**
- **8 Priority Groups**
 - **Veterans upon VA's receipt of application are assigned to one of the groups with Group 1 being the highest priority and Group 8 the lowest.**
- **Effective January 17, 2003**
 - **VA suspended NEW enrollment of veterans assigned to Priority Groups 8e and 8g – no service-connected or other special eligibility, household income exceeds limit, or veteran declines to provide financial information.**
- **Effective June 15, 2009**
 - **VA began to enroll Veterans whose income exceeds current means-tested thresholds by up to 10 percent.**

Basic Eligibility for VA Medical Care, cont.

- Dependent on level of income and service-connected disability, some Veterans are required to pay a co-payment for medications, outpatient care, and inpatient care. VA bills the Veteran's third party insurance for care that is not related to service-connected disabilities.
- OEF/OIF veterans:
 - For 5 years following discharge, eligible for free medical care for treatment of a condition that may be related to military service in a theater of service of combat. ★
 - During this 5 years, they may be charged a co-payment for care provided for treatment of non-combat related conditions. ★★
 - They continue to be eligible for care after the 5 year period; however, they may have a co-payment dependent on which Priority Group they are enrolled.



Standard VHA Benefits

- Preventive Care Services
- Outpatient Diagnostic and Treatment Services*
- Hospital (Inpatient) Diagnostic and Treatment Services*
- Prescription Drugs (when prescribed by a VA physician or prescribed by a physician under a VA purchased care authorization)

* Includes Medical, Surgical, Mental Health, and Substance Abuse



Limited VHA Benefits

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The following care services (partial listing) have limitations and may have special eligibility criteria:

- Beneficiary Travel
- Dental Care
- Durable Medical Equipment
- Eyeglasses and Hearing Aids
- Long Term Care
- Purchased Care from the Community

Beneficiary Travel Eligibility

Travel eligible veterans are those:

- Veterans rated 30% or more SC for travel relating to any condition;
- Veterans rated less than 30% for travel relating to their SC condition;
- Veterans receiving VA pension benefits for all conditions;
- Veterans with annual income below the maximum applicable annual rate of pension for all conditions (\$11,830 for a single Veteran); or
- Veterans traveling in relation to a Compensation and Pension (C&P) Examination

VA pays for plane tickets for Veterans off the road system and those outside South Central Alaska. Mileage is reimbursed at the rate of 41 ½ cents per mile to the nearest VA for those on the road system.



VHA Demographics

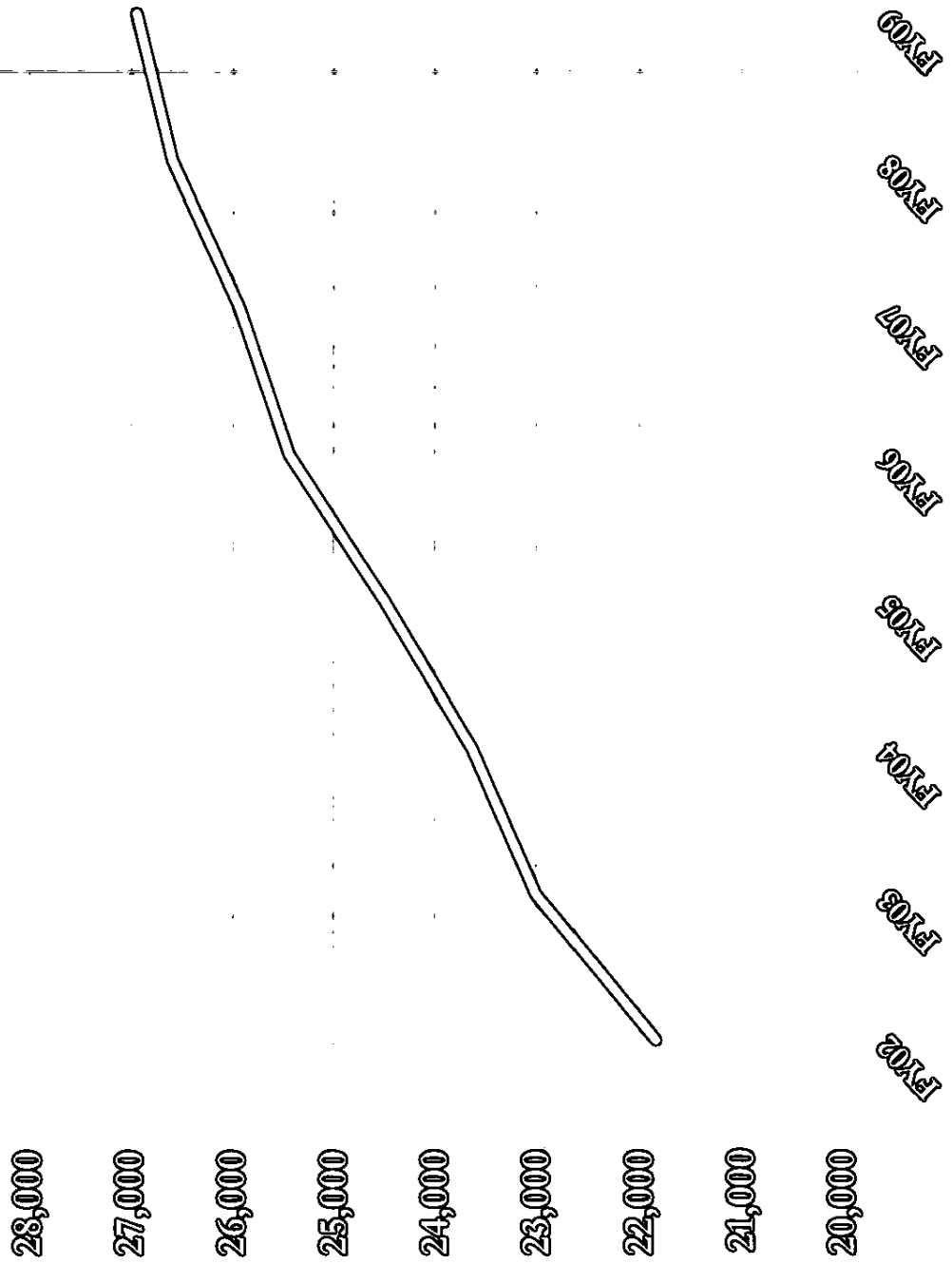
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- 2000 Census - Alaska Veteran Population 71,552
- (17.1% of Alaska Population)
- FY 2009 Veteran Population 76,443
- Projected 2015 Veteran Population 76,995
- FY09
 - Overall Enrollees 26,708
 - Total Unique Patients 15,152
 - VA Outpatient Clinic Visits 142,246
 - VA Purchased Community Visits 48,627

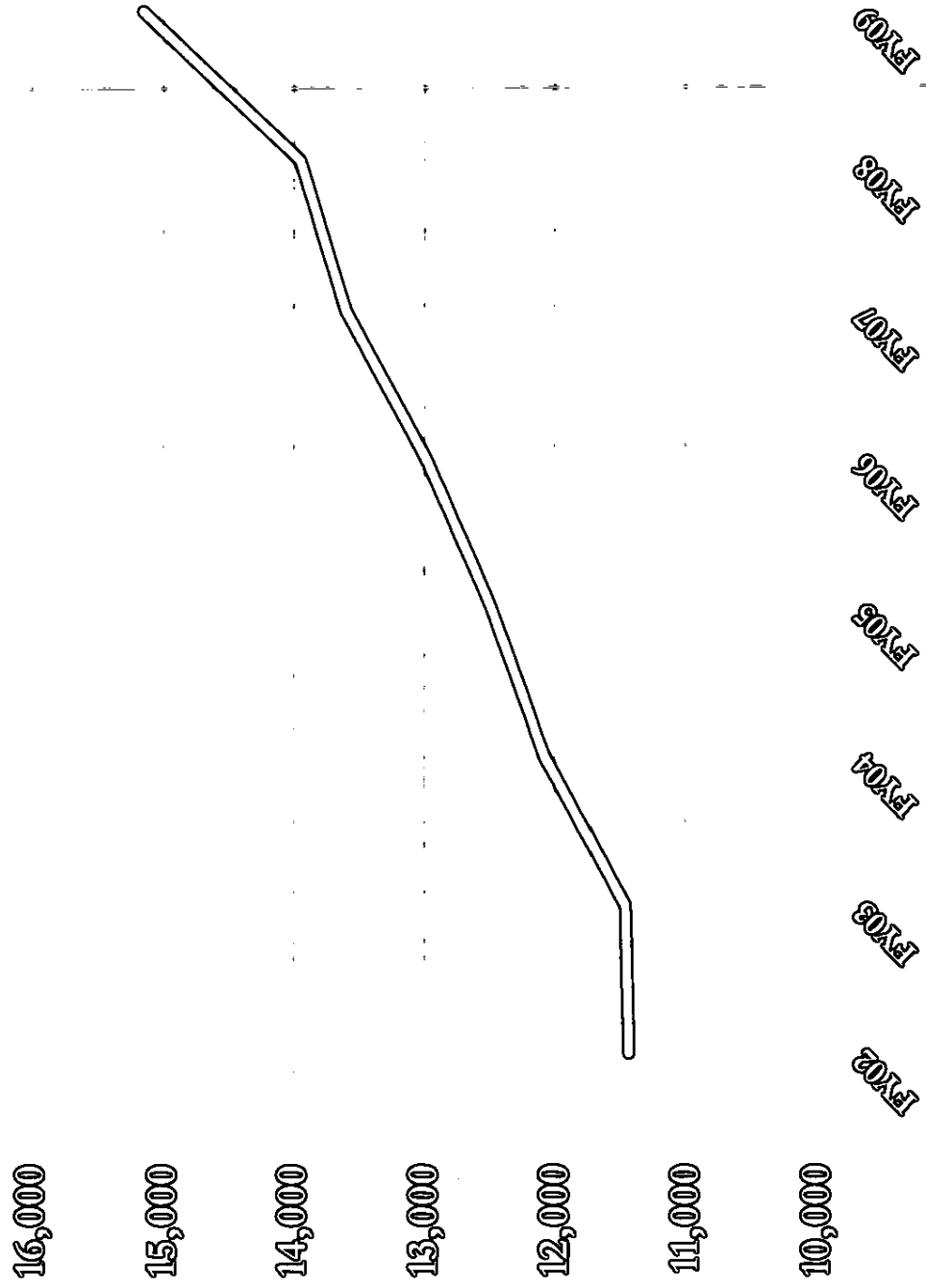
Alaska Veteran Population

By Area of the State	FY09 Veteran Population	% of Vet Pop	FY09 Enrollees for Alaska VA Healthcare
Anchorage	31,301	40.9%	12,426
Fairbanks	13,182	17.2%	4,200
Mat-Su	10,157	13.3%	3,414
Southeast	7,798	10.2%	1,827
Kenai	5,951	7.8%	3,414
West/SW Alaska	4,308	5.6%	804
Northern Alaska	1,144	1.5%	112
Kodiak	1,343	1.8%	320
Valdez/Cordova	1,259	1.7%	337

Demand Enrollees



Demand Users



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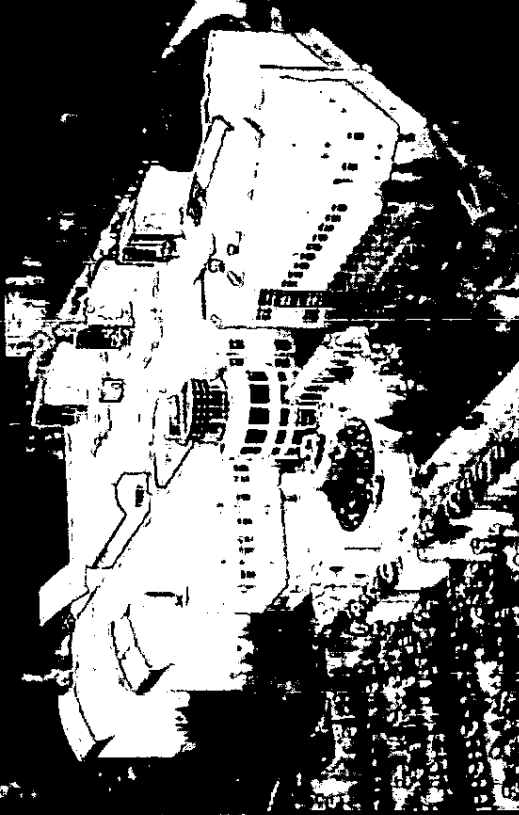
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Sites of VA Care

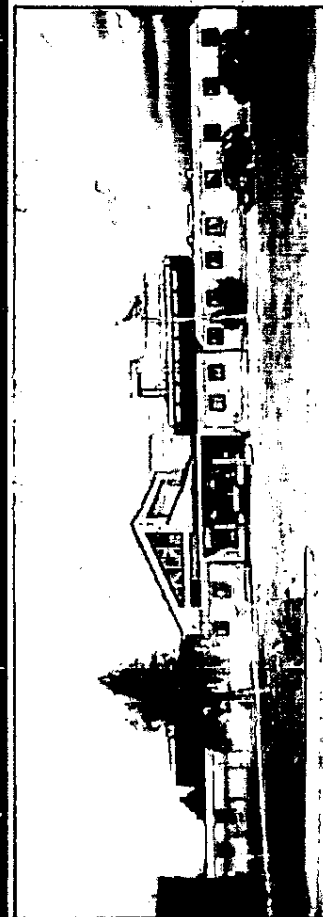
Anchorage
DeBarr Clinic



VA/DOD Joint Venture Hospital
Elmendorf Air Force Base



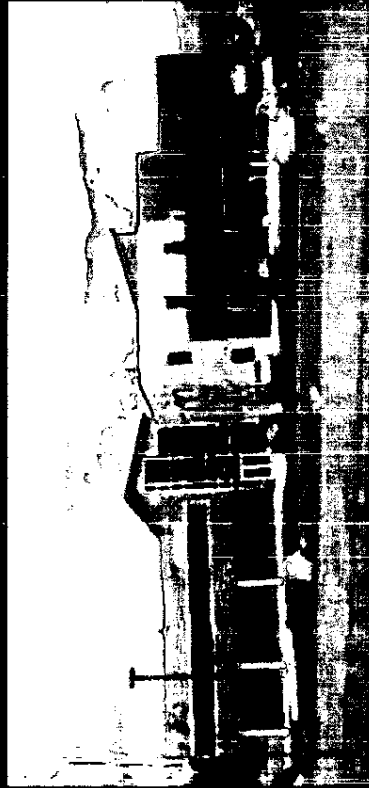
Domiciliary Care for Homeless
Veterans Program



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VA Sites of Care, cont.



Mat-Su VA Community Based Outpatient Clinic



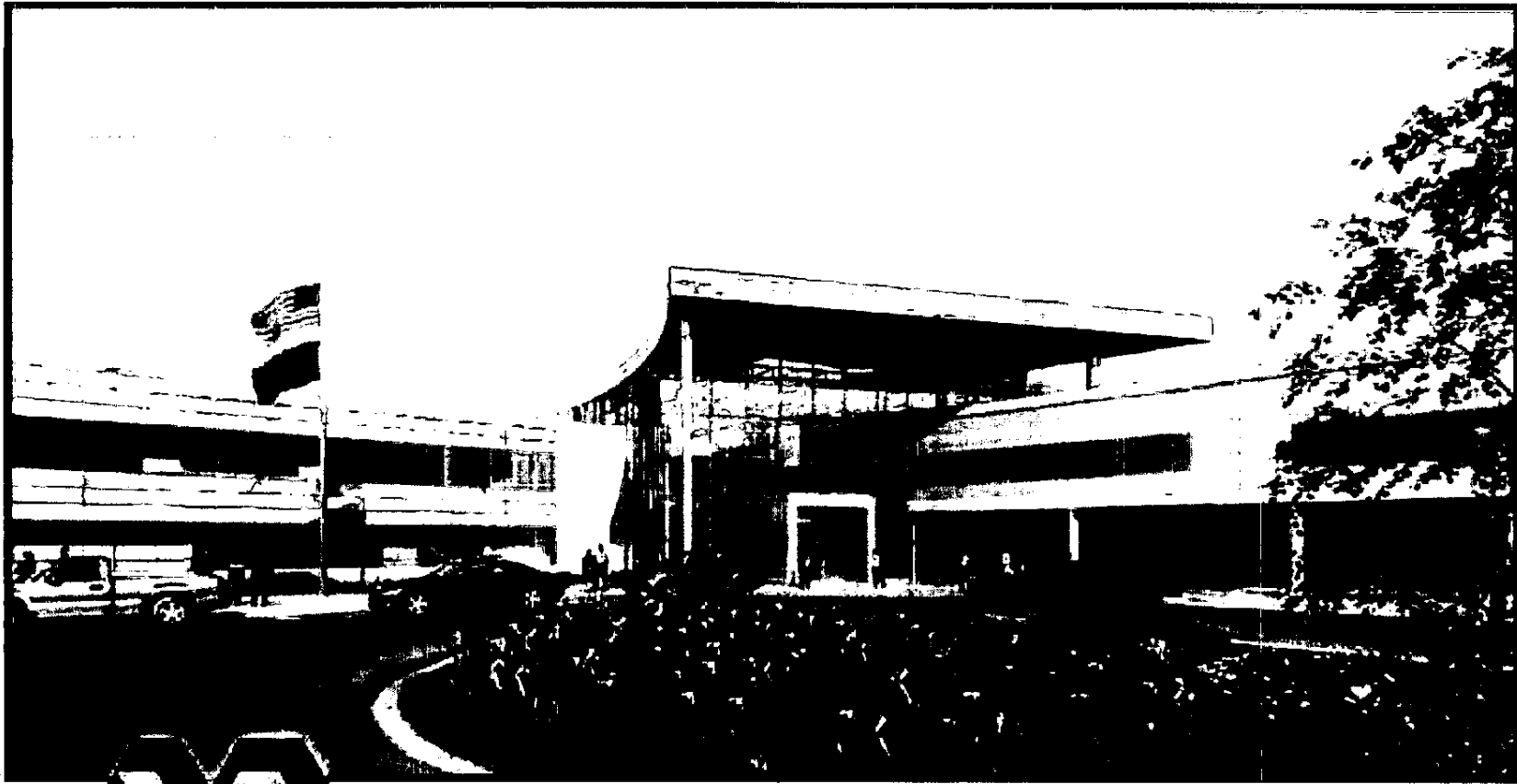
Fairbanks VA Community Based
Outpatient Clinic



Homer VA Outreach Clinic



Juneau VA Outreach Clinic



U.S. Department of Veterans Affairs
Outpatient Clinic & Regional Office
Anchorage, Alaska

Opening May 10, 2010
Ribbon-Cutting Ceremony on May 14, 2010

LIVINGSTON
STONE In association with **SMITHGROUP**

Future Medical Campus



Joint Venture Hospital

- Reallocated department space - 2008
- Continue space reallocation - 2013

Alaska ANG Medical Training Facility

- Start 2009 / 10,000 SF / \$5.4M
- Complete - 2010

New Parking Lot

- Start & Complete - Fall 2009

Army Warrior Transition Unit (WTU)

- Start - Spring 2010
- Complete - Summer 2012

Aeromedical / Mental Health MILCON

- Start 2010 / 33,000 + SF / \$25.6M
- Complete - Spring 2012

Fisher House

- Start 2009 / 20 Suites
- Complete Fall 2010

2nd MRI

- Start & Complete - 2010



Scope of Clinical Services

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- Primary Care to include Home Based Primary Care
- Lab/Radiology/Pharmacy/Dental
- Social and Behavioral Health Service
- Homeless Veterans Service
- Limited Specialty Care
- Ambulatory Surgery
- Coordinated Care Home Telehealth
- Rehabilitation Services
- Prosthetics (Durable Medical Equipment/Home Oxygen)



Alaska VA Healthcare System Delivery of Care

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- **Direct Delivery of Care – Alaska VA Outpatient Facilities**
 - Anchorage
 - Fairbanks
 - Kenai/Homer
 - Mat-Su
 - Juneau

- **Referral to Federal Facilities within Alaska**
 - VA/DoD Joint Venture Hospital – EAFB
 - Bassett Army Community Hospital (BACH)

- **Referral to Federal Facilities outside Alaska**
 - VA Puget Sound Health Care System
 - Other VA Medical Centers

- **Purchase of care from local facilities in Alaska**
 - Hospitals and offices throughout Alaska
 - Inpatient care to Providence under preferred provider contract

Operation Enduring Freedom /
Operation Iraqi Freedom
(OEF/OIF)

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Alaska VA Serving
Returning Service Men and Women



OEF/OIF Outreach

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- **Current Efforts**
 - MOU with State of AK Department of Military and Veterans Affairs
 - Warrior Transition Unit Coordination
 - Post Deployment Health Re-Assessments (PDHRA) with the National Guard
 - Participate in National Guard "Yellow Ribbon" outreach
 - Demobilization Briefs for returning Active Duty Troops
- **Marketing/Education for Rural OEF/OIF Veterans on Available Benefits**
 - Linked to fee outreach activities
 - VHA, VBA, TriWest, TRICARE staff clinical education sessions on "PTSD, TBI, and Suicide Awareness & Prevention" to "hub" Alaska Native Health Corporations February - April 2009. Target audience of licensed providers, community health aids, behavioral health specialists, and village based counselors.

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RURAL HEALTH CARE





Rural Veteran Liaison (RVL)

- Pilot program to hire a VA staff person to be a local community based contact for VA questions on healthcare and benefits.
- Hired Bethel based RVL, Irene Washington, in June 2009.
- Continuous and Open Recruitment for Kotzebue area since December 2008. Nome added to recruitment in December 2009.



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Telehealth

- Coordinated Care Home Telehealth (CCHT) - 223 Veterans

- 31% Highly Rural
- 16% Rural
- 53% Urban

- Tele-Mental Health

- Kenai VA Community Based Outpatient Clinic
- Peer to Peer Professional Staff Consultation with Yukon Kuskokwim Health Corporation and Maniilaq Corporation

Rural Healthcare Pilot Project

- Goal of Pilot:

- Maximize existing VA authorities to provide primary care to rural veterans using purchased care.

- Pilot Areas:

- Bethel Census Area, Bristol Bay Borough, Dillingham Census Area, Nome Census Area, Northwest Arctic Borough, Wade Hampton Census Area, and the City of Cordova

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Questions

Marcia Hoffman-DeVoe

Public Affairs Officer

Alaska VA Healthcare System

Marcia.hoffman-devoe@va.gov

www.va.gov

MEMORANDUM STATE OF ALASKA

To: Joint Armed Services Committee (JASC)

Date: 2 Feb 2010

From: Verdie Bowen

Phone: 907-428-6016

Subject: Veterans Summit Report 2009

Background: On July 30th 2009 a state wide Veterans Summit was held in Anchorage at the Dena'ina Civic and Convention Center. This summit brought together over 100 different veterans organizations and legislators working on issues affecting veterans in Alaska. The summit was sponsored by the Alaska State Legislature's Veterans' Caucus, the Alaska Department of Military and Veterans Affairs, and the Governor's Alaska Veterans Advisory Council.

The information in this report is an accumulation of recommendations from veterans town hall meetings held in communities throughout the state and from committee meetings held during the Veterans Summit. This is a living document and additional items will be added at following summits, and at the recommendation of both the Joint Alaska State Legislative Veterans' Caucus, and the Governor's Veterans Advisory Council.

This year's summit has proven to be such a great success for both reaching out to veterans and for addressing veterans issues in our state that we are planning another summit for July 2010. The 2010 Summit will also be sponsored by Alaska State Legislature's Veterans' Caucus, the Alaska Department of Military and Veterans Affairs, and the Governor's Alaska Veterans Advisory Council.

COMMITTEE REPORTS:

A. *Military Separation Committee*

Co-Chair James Hastings

Co-Chair Lawrence Bethel

A-1. Action Item:

Develop and support a seamless military to civilian transition regarding Alaska-specific benefits and opportunities available. Capture current and new Alaskans at the point of discharge both in and out of state.

Projected Benefit to the Alaskan Veteran:

The Alaskan veteran will maximize their quality of life by utilizing all the benefits they have earned while serving our nation. In turn while utilizing these benefits the veteran will solidify the commitment Alaska and our Nation has for those who have served.

Suggested enhancements:

- Determine as accurately as possible the number of veterans in Alaska.

- Refine the state benefits available and disperse official State of Alaska information on available benefits.
- Tie the PFD (veteran's check box), Army Career and Alumni (ACAP), U.S. Air Force and Reserve Transition Assistance Program (TAP), National Guard Transition Assistance Program, federal yellow ribbon program, and public service announcements together to capture transitioning and overlooked veterans.
- Create an accurate, up to date, engaging presentation designed to encourage the transitioning member to take advantage of Alaska's programs and benefits. Recommend making a State of Alaska transition DVD that can be given to service-members who are transitioning out of the military to the State of Alaska.

Enhancements since the Summit:

- State of Alaska Veterans Benefit pamphlet was formed by the Alaska Department of Military and Veterans Affairs, DMVA, and is currently being printed and distributed to veterans throughout the state.
- Governor Sean Parnell invites Alaska's active duty military personnel to call Alaska home during a speech on Oct 26th 2009 to the Association of the United States Army. He emphasized his commitment to veterans by reflecting the increase of Veteran Service Officers he has located around the state.
- The Joint Alaska State Legislative Veterans' Caucus supports both the increase in Veterans Service Officers in Alaska, and the Department of Military and Veterans affairs 2010 budget request.
- In response to the minimal participation in the voluntary veterans check block on the Alaska Permanent Fund Dividend application, the DMVA is upgrading its software to categorize veteran's separation addresses listed on the DD Form 214. This improvement will allow Alaska's veterans to receive critical information on veterans benefits and issues, and on points of contact. The software upgrade is expected to be complete in late February 2010.

B. Federal Committee

Co-Chair Scott Thorstad

Co-Chair Anita Porter

B-1. Action Item:

Create a transportation network to allow rural veterans access to the U.S. Department of Veterans Affairs, VA, healthcare system.

Projected Benefit to the Alaskan Veteran:

Veterans will be able to obtain VA Healthcare without the burden and expense of transportation.

Suggested enhancements:

- Identify resources in Rural Alaska that can be utilized to support transportation. Bush Pilots, Civil Air Patrol, local transportation.
- Develop resources to support the needs of the rural areas.
- Educate veterans about the process.

Enhancements since the summit:

- The VA travel office is currently directly paying for the expenses of a veteran's first six trips to a VA healthcare facility from rural Alaska. After six trips, the veteran receives reimbursement for their travel from rural Alaska.
- The VA travel office is currently directly paying all travel expenses for all initial Compensation and initial Pensions exams for veterans traveling from rural Alaska.

B-2. Action Item:

Provide VA healthcare to veterans in Rural Alaska through local resources.

Projected Benefit to the Alaskan Veteran:

Making healthcare available at or near the rural veteran will improve the veterans quality of life and will ensure a healthier veteran.

Suggested enhancements:

- Identify local services/systems in rural areas as well as the current processes for healthcare in rural areas.
- Create/develop agreements to utilize the local resources and services without re-inventing systems.
- Create resources to educate and assist veterans locally so that they can better understand their benefits and how to utilize them.

Enhancements since the summit:

- The VA has opened a new Outreach Clinic in Homer Alaska to service the South Peninsula veterans community.
- The VA has initiated The Rural Health Pilot Project. This is a one year project designed to purchase rural healthcare were the veteran lives. If successful, this program may become permanent. The pilot areas include: Bethel Census Area, Dillingham Census Area, Northwest Arctic Borough, With the City of Cordova, Bristol Bay Borough, Nome Census Area, and Wade Hampton Census Area

C. *Judicial Committee*

Co-Chair Jack Fuller

Co-Chair Sig Murphy

C-1. Action Item:

Support the Alaska Veterans Court through greater education and legislation

Projected Benefit to the Alaskan Veteran:

This diversion program is designed to prevent veterans charged with misdemeanors from falling into a life of crime. This program also helps the VA system treat combat veterans and return them to the quality of life they experience before the combat experience.

- The State of Alaska needs to work more closely with Judge Postma to ensure Veterans Court has the resources it needs to provide the projected benefits

Enhancements since the summit:

- In the Anchorage area the police departments have posted advertisements for offenders reflecting the benefits of using the Veterans Court system.

D. Executive State Committee

Co-Chair Joe Fields, Chair of the Veterans Advisory Council

Co-Chair Verdie Bowen, Director of Alaska Veterans Affairs

D-1. Action Item:

Advocate for the creation of the Department of Veterans Affairs and a Commissioner.

End Result of Action Item:

Create and staff a New Alaska Department of Veterans Affairs (AKDVA)

Projected Benefit to the Alaskan Veteran:

- Alaska's high density of military veterans in relation to its total population, 70,000 – 80,000 veterans in a population of 687,000 or, about 10.9% to 11.6%, presents a significant constituency for the creation of the department and position.
 - Alaska's veteran population is a mature population with property holdings, good education and training.
 - Roughly 8,000 – 9,000 of Alaska's veterans are retired representing as much as, \$225 million dollars in pension funds brought into the state.
 - Veterans' disability and medical compensation is estimated by Veteran Service Officers (VSO's) at \$30 - \$40 million per annum.
 - Rural and remote area veterans are disproportionately the community leaders.
 - The socio-political and economic characteristics of Alaska veterans', warrants the creation of a position in the Governor's Cabinet, a Commissioner of Veterans affairs.
 - Alaska's veterans represent the largest single common-interest voting constituency for both candidates and, issues.
- Creation and staffing of a Department of Veterans Affairs and the separating Alaska veterans support from the Department of Military and Veterans Affairs does not reflect poorly on the DMVA. There are two different missions and the separation will allow for more unified and cohesive missions for both departments.

Enhancements since the summit:

- Governor Sean Parnell or his representative will attend all Alaska Veterans Advisory meetings
- The plan to move the State of Alaska Office of Veterans Affairs from Fort Richardson to the Jewel Lake Armory has been approved and will make access to veterans services easier for veterans. The move is pending until after the Kulis Alaska Air National Guard assets are relocated to Elmendorf.

- The capabilities of the Alaska Office of Veterans Affairs have increased through the addition of two more State of Alaska employees and two more Veterans Service Officers.

D-2. Action Item:

Create an Alaska Veterans Service Medal (with certificate) for all veterans who joined or were inducted into U.S. military service from Alaska or, served in Alaska during their military service to the U.S.

Case for new benefit:

Many states issue a variety of commendations and medals to veterans of military service to recognize their service and to encourage state pride.

- Medals would be distributed through an application and verification process.

Projected Benefit to the Alaskan Veteran:

- Medal would show a commitment and gratitude by the state to its veterans and go a long way toward preventing feelings of disenfranchisement from veterans who reside in Alaska.

Enhancements since the summit:

- This item is under research and review.

D-3. Action item:

Allow for the selection, survey and title transfer of 5 – 20 acres of Alaska Open-To-Entry lands, not otherwise reserved, to any qualified veteran. Said land to be used for any legal purpose. Develop appropriate qualifications.

Case for enhanced benefit:

- There already exists: A Veteran's Land Discount Program. Under this program eligible veterans can receive a 25% discount on the purchase of residential/recreational land from the state. However, the Veteran's Discount can only be used once in an applicant's lifetime. This discount cannot be used for purchase of agricultural, commercial, or industrial land. And, it is limited to lands selected and developed for sale by DNR, not lands selected by the veteran.
- And, a Veteran's Land Sale Preference: In 1984, the legislature created the Subdivision and Homesite programs which are specifically excluded from the veteran's preference and made the Veteran's Land Discount unavailable on land acquired under the Veteran's Land Sale Preference Program. Since that time, veterans have found the program much less attractive.
- A new veteran's land act would reduce constraints on the use of lands.

Projected Benefit to the Alaskan Veteran:

- This would allow the Alaskan Veteran the ability to purchase state land and use it for personal use and would increase their quality of life

Enhancements since the summit:

- This item is under research and review.

D-4. Action Item:

Advocate for the creation of the Alaska State Veterans Cemetery Division within the new Alaska Department of Veterans Affairs (AKDVA) to be located in Fairbanks.

Background for enhanced benefits:

Establish and staff the Alaska State Veterans Cemetery Division within the AKDVA in Fairbanks.

The 26th Alaska Legislature resoundingly passed SB 45 relating to State Veterans' Cemeteries: "An Act relating to state employment preferences for veterans, former prisoners of war, and members of the Alaska National Guard; authorizing the Department of Military and Veterans' Affairs to establish and maintain Alaska veterans' cemeteries; establishing the Alaska veterans' cemetery fund in the general fund; and authorizing the legislature to appropriate income from fees collected for commemorative veterans' plates to the Alaska veterans' cemetery fund."

Efforts in interior Alaska to establish a Veterans Cemetery date back nearly 40 years and arise from the distance to the existing Veterans Cemeteries from the interior. The process of establishing a Veterans Cemetery is more than just a bureaucratic undertaking, it is a community undertaking and should be undertaken in the community where the cemetery will be established not, out of an office in south central Alaska.

- Approximately 10,000 to 12,000 veterans live in Fairbanks and environs.
- Site selection, community relation, design and construction will all take place in Fairbanks.
- Cemetery management operations and maintenance will take place in Fairbanks.

Projected Benefit to the Alaskan Veteran:

- This will allow the families of the 1100 veterans who pass away in the Fairbanks region a place close to home
- Once the cemetery is funded and the grounds are developed this will create a State Cemetery department under the Office of Veterans affairs with a full time staff of three and two part time employees and this will increase this kind of service to the veteran and their families
- The new cemetery will significantly extend the life of the Fort Richardson Cemetery

Enhancements since the summit:

- The DMVA has placed in its FY 2010 budget request \$1 million to allow for the Federal VA grant match
- The Joint Alaska State Legislative Veterans' Caucus supports the funding request
- The Office of Veterans Affairs has had discussions with the VA State Cemetery Grants Service to ensure funding after the state funds are available
- Office of Veterans Affairs attended a meeting on location of cemetery subsequent meeting will follow

D-5. Action Item:

Increase the Disabled Veterans Property Tax Exemption

Projected Benefit to the Alaskan Veteran:

Allow Disabled Veterans the ability to continue living in their homes after the increase of value exceeds the exemption

Suggested enhancements:

- Increasing the current tax exempt status will allow disabled veterans the ability to keep their homes. This change allows for the increase in the value of homes in the past decade.

Enhancements since the summit:

- The legislature currently has several bills before it to increase the veterans property tax exemption.

D-6. Action Item:

Create a specific fund to assist in the payment of transportation and housing costs for rural and remote veterans and a designated family member or qualified attendant for medical travel.

End Result of Action Item:

Establish a Transportation and Housing Fund for Rural and remote veterans.

Background:

- Transportation

Alaska's rural and remote veterans live in a variety of locations from Metlakatla in S.E.; to Adak Island in the Aleutians; to Point Hope in the far west; to Barrow and Kaktovik in the north and N.E. All transportation access is limited and expensive. Due in part to restrictive land use policies and limitations on resource development, the economies of all these regions are in bad shape. Unemployment rates listed for these general areas by the AK Dept. of Labor are:

Prince of Wales – Outer Ketchikan	14.7%
Aleutians East Borough	10.5%
Bethel Census Area	30.0%
Northwest Arctic Borough	15.1%

The earning ability of all residents in these areas is greatly limited and the earning ability of veterans suffering from medical problems is practically nonexistent.

- Housing

In this case, housing refers to temporary housing for veterans and families or, qualified attendants aiding the veteran. Off-season housing accommodations in Anchorage area are more available and more reasonably priced than during in-season. During the in-season time frame, hotel rooms can be 3 to 4 times the off-season rate. In-season rates can exceed \$250 per day.

- Rural and remote veterans total population is likely less than 5,000.
- A warrant or grant system could be easily established.
- Some percentage of costs may be recoverable from the U.S. Veterans Administration or through federal legislation.
- Easing the cost burden of examination and medical treatment for the rural and remote veteran will have a positive impact on the quality of life and the productivity of their communities.
- The socio-political and economic characteristics of Alaska rural and remote veterans', warrants the creation of a fund.

Enhancements since the summit:

- On May 13th construction will begin on the new Fisher House on Elmendorf Air Force Base. The Fisher House provides free housing for families of patients receiving medical care in South Central Alaska, and it will be for the benefit of active duty service-members, National Guardsmen, reservists, and for veterans who are using the VA healthcare system.

D-7. Action Item:

Review the intent of Alaska Statutes regarding state veteran hiring practices.

Projected Benefit to the Alaskan Veteran:

Have a true veterans hiring preference for the State of Alaska.

Background:

- Concern has been expressed that State veterans hiring preference is not being implemented as required by statute.
- It is reported that the Department of Administration has made changes to the original intent adding points to scores of veterans, disabled veterans and former prisoners of war. This "tinkering" suggests agencies can hire anyone and certainly suggests pre-selection is a workable option.
- Problems:
 - It is not clear that the present definition of veteran is inclusive of all veterans and National Guard members who have served and not limited by timeframe.
 - A veteran may be "considered" for a preference in an interview if the veteran meets requirements. But, if the veteran meets the minimum requirements then shouldn't they be interviewed in any case? Making the "Consideration" a worthless action and clearly not a preference?
 - The veteran should have the ability to review the interview in accordance with State laws and regulations.

Suggestion for Preference

- GENERAL REQUIREMENTS FOR PREFERENCE

To receive preference, a veteran must have been discharged or released from active duty in the Armed Forces under honorable conditions (i.e., with an honorable or general discharge). As defined in 5 U.S.C. 2101(2), "Armed Forces" means the Army, Navy, Air Force, Marine Corps, Coast Guard, and National Guard.

- 5-POINT PREFERENCE

Five points are added to the passing examination score or rating of a veteran who served and received a discharged prescribed above.

- 10-POINT 30 PERCENT COMPENSABLE DISABILITY PREFERENCE

Ten points are added to the passing examination score or rating of a veteran who served at any time and who has a compensable service-connected disability rating of 30 percent or more or received a Purple Heart

When applying for State of Alaska jobs, eligible veterans should claim preference on their application or resume. Applicants claiming 10-point preference must complete provide evidence of the preference.

Enhancements since the summit:

- Item to be addressed in detail at the 2010 Summit.

Points of Contact:

Alaska State Legislative Veterans' Caucus
Co-Chair, Representative Bill Thomas
Co-Chair, Senator Charlie Huggins

Staff: Josh Tempel
907-269-0208
josh_tempel@legis.state.ak.us

Verdie Bowen
Alaska Director of Veterans Affairs
Governor's Alaska Veterans Advisory Council
907-428-6016
verdie.bowen@alaska.gov

MEMORANDUM STATE OF ALASKA

To: Joint Armed Services Committee (JASC)

Date: 2 Feb 2010

From: Verdie Bowen

Phone: 907-428-6016

Subject: Post-9/11 GI Bill Current Status

The current status of the Post-9/11 GI Bill reflected below is the overall national program. Due to the numerous non-electronic payments to the veteran, individual state statistics will not be available until after March 2010. The VA office in Alaska issued over 200 individual checks in the month of December for advance payments to students attending our schools.

To meet the demand of the education upswing among veterans participating in the Post-9/11 GI Bill the VA has hired an additional 760 new employees in Oklahoma. Along with the new additions, the VA has authorized maximum overtime efforts to help mitigate the effects of this surge in new benefit requests. As of Dec 2009 the VA has a total of 1200 VA employees working to process education claims. Most of the slowdowns are directly contributed to training and this will be fixed over time. It takes on an average of 6 months to train new employees to the level required for faster claim service. The 6 month mark for the majority of the 760 new employees is the end of March.

Current Nation Status as of Jan 15th 2010

- 382,042 students have applied for a Certificate of Eligibility (C of E)
 - To date 333,131 of those have been issued a C of E

- 183,647 students have enrolled in classes and notified the VA of school attendance
 - 155,240 of those have received payments
 - VA is processing approximately 5000 claims a day
 - The VA is taking an average of 47 day to process payments from the first day schools certifies enrolment of the veteran to the VA
 - Since Post-9/11 Start date \$672M issued to veterans
 - Since Post-9/11 Start date \$505M issued to schools
 - The VA processed over 72,000 advanced payments nationwide totaling over \$214M

MEMORANDUM STATE OF ALASKA

To: Joint Armed Services Committee (JASC)

Date: 2 Feb 2010

From: Verdie Bowen

Phone: 907-428-6016

Subject: Post-9/11 GI Bill Overview

In July of 2008 the Post-9/11 GI Bill was signed into law, creating a new robust education benefits program rivaling the WWII Era GI Bill of Rights. The new Post 9/11 GI Bill, which went into effect on August 1, 2009, provides education benefits for service members who have served on active duty for 90 or more days since Sept. 10, 2001. These benefits are tiered based on the number of days served on active duty, creating a benefit package that gives current and previously activated National Guard and Reserve members the same benefits as active duty service members.

The Post-9/11 GI Bill offers greater benefits than ever, but figuring out who gets what can be very confusing. The following overview can help provide basic understanding of the program.

Details on the New GI Bill Benefit

The Post-9/11 GI Bill offers a new set of benefits for service members and veterans attending education and training programs taken at an accredited college or university. Post-9/11 benefit payments are tiered based on the amount creditable active-duty service you have since Sept. 10, 2001.

Table of Post-9/11 Benefits - Who Gets What?

The following table offers a quick overview of the Post-9/11 GI Bill benefits for each major group of recipients who meet the basic eligibility qualifications listed below.

If You Are:	You Qualify for:	Tuition and Fees	Monthly Housing Stipend	Book Stipend	Able to Transfer Benefits	Yellow Ribbon	Relocation Allowance	Licensing and Certification Exams
On Active Duty		NOTE 1			X			X
A Guard or Selected Reserve Member		X	NOTE 2	X	X	X	X	X
A Veteran		X	NOTE 2	X	NOTE 3	X	X	X

NOTE 1: Members on active duty receive the full tuition payment - it is not limited by the state maximum payment rate.

NOTE 2: All students on active duty, those pursuing half-time or less and those attending 100% distance learning (online, etc.) courses are not eligible for the Housing Stipend.

NOTE 3: The veteran may only choose to transfer benefits while still serving in the military on active duty.

Tuition and Fees

For eligible veterans the VA will pay the tuition & fees payment directly to the school. This payment is not to exceed the highest undergraduate tuition & fees rates at a state operated college or university (Institution of Higher Learning). This payment rate is based on the state in which the school is located - not the veteran's state of residence.

If you attend in Alaska the amount is:

Alaska for year 2010	\$159.00	\$13,429.00
----------------------	----------	-------------

Note: Members on active duty receive the full tuition payment - it is not limited by the state maximum payment rate.

Yellow Ribbon Program (YRP) - The new GI Bill also includes a provision to help students avoid some or all of the out-of-pocket tuition and fees associated with education programs that may exceed the Post 9/11 GI Bill tuition benefit. The YRP is not automatic; schools must enter into an agreement with the VA to share the expense.

To qualify to receive the YRB benefits the veteran must meet the following criteria:

- Served an aggregate period of active duty after September 10, 2001, of at least 36 months;
- Were honorably discharged from active duty for a service connected disability and have served a minimum of 30 continuous days after September 10, 2001;
- Are a dependent eligible for Transfer of Entitlement under the Post-9/11 GI Bill based on a veteran's service under the eligibility criteria listed above.

There are 16 Yellow Ribbon Schools located in Alaska:

ALASKA BIBLE COLLEGE
ALASKA PACIFIC UNIVERSITY
CENTRAL TEXAS COLLEGE FORT RICHARDSON
CENTRAL TEXAS COLLEGE FT WAINWRIGHT
CHARTER COLLEGE
EMBRY-RIDDLE AERONAUTICAL UNIV ELMENDORF AFB
EMBRY-RIDDLE AERONAUTICAL UNIVERSITY - FAIRBANKS CAMPUS
KENAI PENINSULA COLLEGE
KODIAK COLLEGE
MATANUSKA-SUSITNA COLLEGE
PRINCE WILLIAM SOUND COMMUNITY COLLEGE
UNIVERSITY OF ALASKA - ANCHORAGE
UNIVERSITY OF ALASKA - FAIRBANKS
UNIVERSITY OF ALASKA - SOUTHEAST
WAYLAND BAPTIST UNIVERSITY ANCHORAGE
WAYLAND BAPTIST UNIVERSITY FAIRBANKS

Monthly Living Stipend

As an eligible veteran or member of the National Guard or Selected Reserve you may receive a monthly housing allowance (living stipend) based on the ZIP code of the location of the school you are attending - not your home ZIP code. This stipend currently averages \$1,200 a month, but can run as high as \$2,700.

This stipend is based on the DoD's Basic Allowance for Housing (BAH) for an E-5 with dependents. This stipend does not require students to live on campus. For Alaska the amount is currently \$1836 a month and could change depending on the military's BAH surveys.

NOTE: Service members currently on active duty and veterans (and eligible family members) taking courses on a half-time or less basis and/or taking 100% of their classes at a distance (online etc.) do not qualify for the monthly housing stipend.

Book and Supply Stipend

Students may receive an annual book stipend of up to \$1,000 if they are a veteran or member of the Guard or Selected Reserve. This stipend is paid at the beginning of each term. It is paid proportionately based on the number of credits taken by each student at \$41 per credit hour.

NOTE: Service members currently on active duty are not eligible for the Book Stipend.

One-Time Relocation Allowance

The veteran may also receive a one-time rural relocation benefit payment of \$500.00 to help cover the cost of relocating from a rural location to attend school.

To qualify the veteran must:

- Be an otherwise eligible veteran.
- Reside in a county/burrow with 6 persons or less per square mile (as determined by the most recent decennial census) and:
- Either physically relocate at least 500 miles to attend an educational institution
- or -
- Travel by air to physically attend an educational institution if no other land-based transportation exists.

Benefit Transferability

The Department of Defense (DoD) is authorized to allow individuals who, on or after August 1, 2009, have served at least 6 years in the Armed Forces and who agree to serve at least another 4 years in the Armed Forces to transfer unused entitlement to their Spouse. Once the member has reached their 10 year anniversary they may choose to transfer the benefit to any dependent(s) (spouse, children).

NOTE: The ability to transfer benefits is limited to those currently serving in the military with some limited provisions for those retiring over the next few years.

Other Benefits

In addition to the tuition, fees, housing, and relocation benefits, you may also qualify for a one-time reimbursement of up to \$2,000 for a certification or licensing exam, work-study programs, and \$100 a month for tutorial assistance.

Eligibility Criteria for Post-9/11 GI Bill Benefits

Veterans are eligible if they served a minimum of 90 days on active duty after September 10, 2001. This covers active duty served as a member of the Armed Forces or as a result of a call or order to active duty from a reserve component (National Guard and Reserve) under certain sections of title 10.

However, some periods of active duty service are excluded. Periods of service under the following do not count toward qualification for the Post 9/11 GI Bill:

- Active Guard Reserve (AGR) (Title 32);
- ROTC under 10 U.S.C. 2107(b);
- Service academy contract period;
- Service terminated due to defective enlistment agreement;
- Service used for loan repayment; *and*
- Selected reserve service used to establish eligibility under the Montgomery GI Bill (MGIB chapter 30), MGIB for Selected Reserve (MGIB-SR Chapter 1606), or the Reserve Education Assistance Program (REAP chapter 1607).

Further Details from the VA:

At a minimum, a veteran must have served at least 30 days of continuous active duty service after September 10, 2001 and be discharged due to a service-connected disability, or served an aggregate of 90 days of active duty service after September 10, 2001, and:

- Be honorably discharged from Armed Forces; or
- Be released from Armed Forces with service characterized as honorable and placed on the retired list, temporary disability retired list, or transferred to the Fleet Reserve or the Fleet Marine Corps Reserve; or
- Be released from the Armed Forces with service characterized as honorable for further service in a reserve component; or
- Be discharged or released from Armed Forces for:
 - EPTS (Existed Prior to Service)
 - HDSP (Hardship) or
 - CIWD (Condition Interfered with Duty); or
 - Continue to be on active duty.

Post 9/11 GI Bill Benefit Tiers

All Post 9/11 GI Bill benefit payments are based on the amount of creditable active-duty service each veteran has since Sept. 10, 2001. If the student is an active-duty, National Guard, Selected Reserve member, or veteran who has served on active-duty for 90 or more days since Sept. 10, 2001 the following table applies:

Post-9/11 Service	Percentage of Maximum Amount Payable
At least 36 cumulative months (Includes Entry Level or Skills Training time)	100%

At least 30 continuous days on active duty and discharged due to service-connected disability (Includes Entry Level or Skills Training time)	100%
At least 30 cumulative months (Includes Entry Level or Skills Training time)	90%
At least 24 cumulative months (Cannot include Entry Level or Skills Training time)	80%
At least 18 cumulative months (Cannot include Entry Level or Skills Training time)	70%
At least 12 cumulative months (Cannot include Entry Level or Skills Training time)	60%
At least 6 cumulative months (Cannot include Entry Level or Skills Training time)	50%
90 aggregate days (Cannot include Entry Level or Skills Training time)	40%

FINAL NOTE: Only the VA can verify your personal eligibility for GI Bill benefits. If eligibility questions arise please call the VA at 1-888-GIBILL-1 they are standing by to help.

MEMORANDUM STATE OF ALASKA

To: Joint Armed Services Committee (JASC)

Date: 2 Feb 2010

From: Verdie Bowen

Phone: 907-428-6016

Subject: Alaska Territorial Guard (ATG) Report

The Department of Military and Veterans Affairs (DMVA) is providing this information to update the JASC on the ATG program managed through the Office of Veterans Affairs. We have had an exciting year with the ATG program. Yes there are lots of ups and downs, but today I will report the positive impacts of this program on our veterans.

We expected the good news about ATG member's retirement benefits being reinstated to generate a surge in ATG applications and enquiries and this is exactly what occurred. The applications are coming in now about three to four a week and this is a very good response. I would be remiss if I reported that all ATG veteran dependants were totally pleased. Some thought with a veteran's status cash would flow to the families and this is only true if a veteran served in the National Guard, or active duty military, for 15 + years and the five years of ATG time made them eligible for federal retirement. I am going to break down the State and Federal benefits the ATG veteran could receive.

First, the VA offers two benefits to the ATG veteran; Disability Pension and Surviving Spouse Death Pension. These two pensions are not transferable to surviving children except those who are under the age of 18. The maximum annual rates that each member or spouse can receive depends on their current income level. If the income level exceeds the basic rate set by the VA then the member or spouse will not qualify for funds. For example; a single ATG veteran with no income will receive under this plan \$11,830 a year and a surviving spouse will receive \$7,933. These rates change as the individual requirements change. Also note that these rates go up each year when a COLA is passed by Congress. Now let us move to National Guard service with additional federal military service that led to a full retirement.

We have currently 22 members who served in the ATG who are eligible for federal military retirement. They each spent 20 + years in active military service and with the addition of the ATG time now receive a combined retirement check from the Defense Accounting System. The good news is we are currently continuing the research to find other members who qualify for retirement. To date we have found four new ATG retirement eligible veterans. The first three will start receiving their new check on the 1st of February. The last member should start receiving his check by the first of March. Along with retirements come survivor's benefits for widows.

We have worked hard to dig through our military personnel records to find all the ATG members who served 15+ years. This is my time to reflect credit on a very special person; Linda Flegle. She has performed hours and hours of exhaustive research on the part of the ATG and it has paid off. She has discovered 32 spouses that might receive survivor's benefits payments. Since November we have prepared all the packages and as of the 27th of Jan have all 32 packages on the desks of the auditors in St Louis. Once they go through the verification process, those spouses who

are eligible will start receiving the monthly survivor's benefits. This includes pay and healthcare. The last part of the monetary funds I want to discuss is the state retirements.

We have found during our search 6 members of the ATG who were eligible for National Guard state retirements. These retirement documents were sent to the Division of Retirements and Benefits and should be processed soon. The key point about these retirements is no surviving members or spouses were found and the benefit will be paid to the next of kin. Now let me move into some non monetary services.

The VA offers free of charge a grave maker for each veteran. We had an issue last summer when the VA would not send the markers to Post Office Boxes and after a discussion with Mr. Silva Director of Mortuary Services this was corrected and our ATG veterans are now receiving this honorable benefit. I would be remiss in not mentioning our Alaska National Guard Military Funeral Honors Team along with the VA grave markers. This team has a motto of "Honoring Those Who Serve" and this is reflected by their willingness to serve any place any time. They performed over 158 services in 2009 alone and are projecting even more services this year. One fine point about this team is that if an ATG veteran did not receive an Honor Ceremony in the past the team will go out now and do the service and present the flag to the family. Finally, I will move to the current ATG Discharge status.

The current status of ATG discharges are:

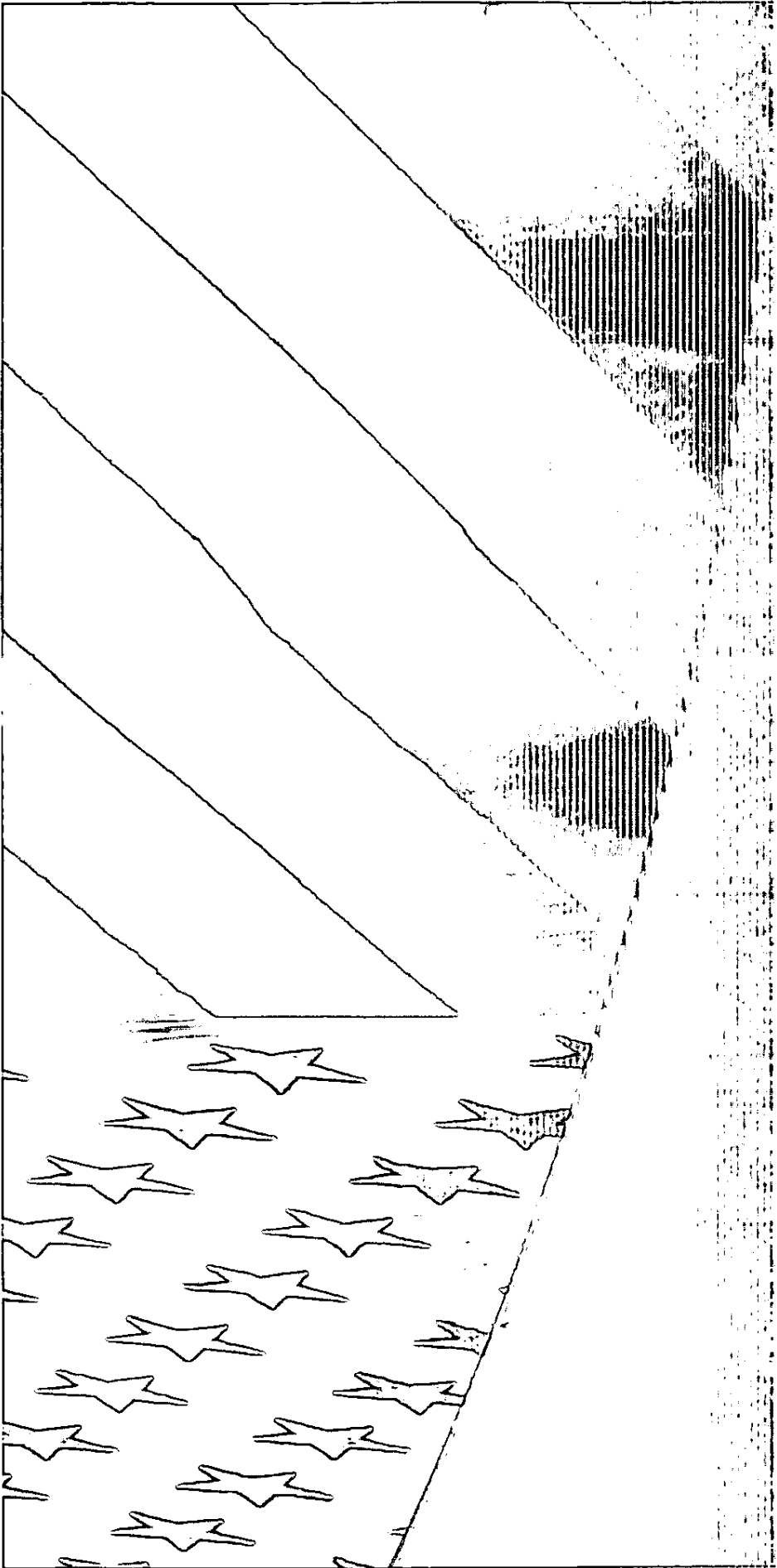
1592 ATG discharge applications have been received by DMVA from veterans and family members.

1057 ATG discharges have been received from the U. S. Army. Over 72 discharges are pending certification by the Army Personnel Center.

We have identified 163 living ATG members. As of this date 146 discharges have been issued to living ATG members. Our plan it to continue presenting the discharges in a Ceremony where the members live. We accomplished 20 in 2009 in villages throughout Alaska.

This information should be helpful and I will continue to update the JASC as changes occur. This is one of the biggest honors we have in the Office of Veterans Affairs, service to our Alaska Territorial Guard.

Alaska PTA & the Military



History: 1962

- The liaison between the board of managers and the on-base schools was chosen from the military units and worked with the Second Vice-President
- While there are only eight units, they enroll larger membership than any other.

History: 1997

- With a \$4000.00 new initiative grant from National PTA the Alaska PTA created a:
*Handbook for **Families and Education Military Style***
- Based on the input from Fairbanks, Kodiak and Anchorage Air Force, Coast Guard and Army families
- Organized by the National Standards for Parent/Family Involvement Programs

History: 2001

- Alaska Military Education Forum hosted by:
 - Alaska PTA
 - Alaska Department of Education and Early Development
 - Anchorage West High PTSA
 - Alaskan Command

Purpose:

- To provide information on key subjects related to K-12 education of military students including High School Qualifying Exit Exam
- Formulate items of interest with recommendations for the military leadership and Alaska Department of Education & Early Development

Attendance: 92 Adults & 10 Students

- US Army Alaska Commander & Deputy Alaskan Command Commander
- President of University of Alaska
- Commissioner of Education for AKEED
- Alaska Senators and Representatives
- Director of Military & Veteran Affairs & Adjutant General for Alaska
- First Lady for US Army Alaska
- First Lady of Alaskan Command
- National Military Family Association
- Military Child Education Coalition

2009: the Question

What is Alaska's capacity to support it's military and families in the areas of:

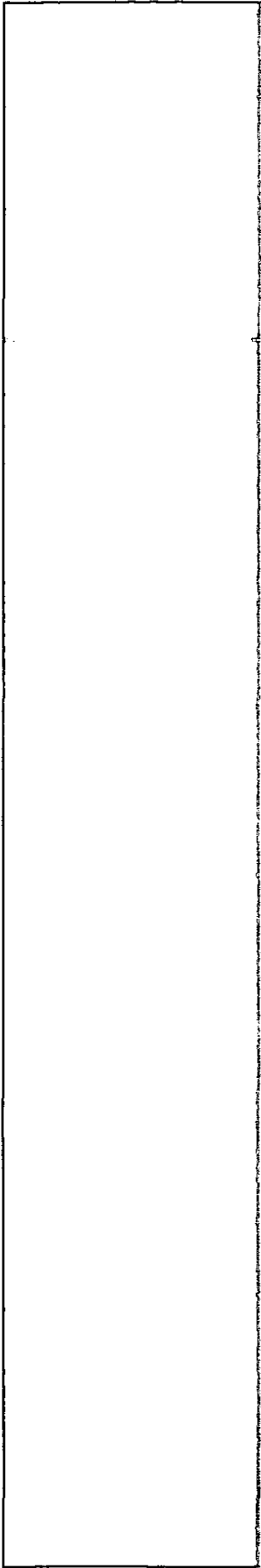
- Health Care
- Family Support Services
- Veteran Benefits & Accessibility
- What is Available?

Details: Designated Grant from AK Legislature: Department of Community & Economic Development

- Kodiak, Fairbanks, Anchorage
- Collect challenges and Good Practices

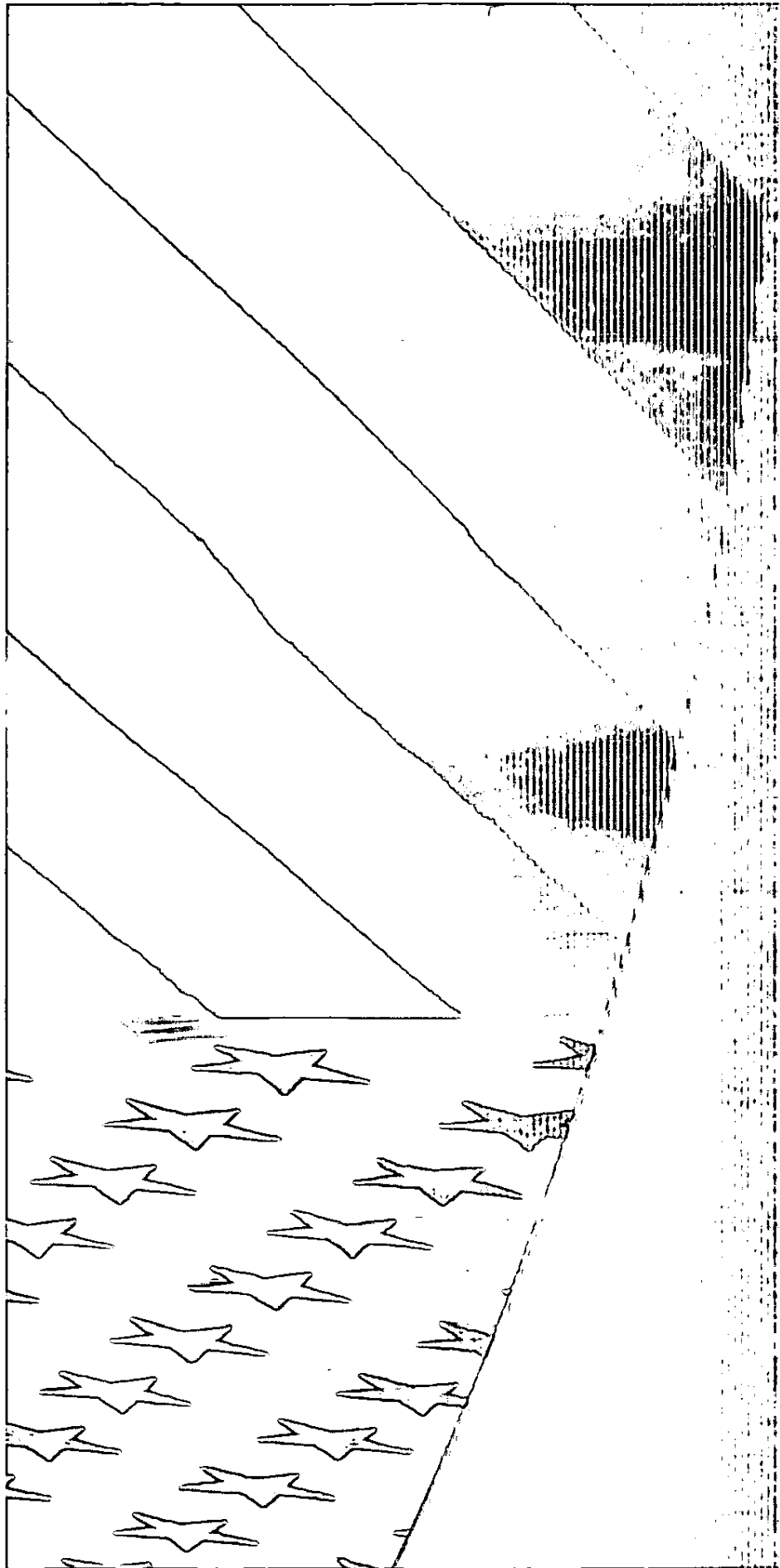
Present Results to:

- Alaska PTA
- Alaska Legislature
- Alaska Federal Delegation
- Military Partners



Next Steps:

November 5th & 6th, 2010
BP Energy Building
Anchorage, Alaska



Thank you for Participating

<http://www.alaskapta.org/akmilsummit2009>



Fisher House

*Because a family's love
is good medicine*

Fisher House Mission

- A “home away from home” for service members, veterans and their family members
- Warm, compassionate environment for families to heal, support each other
- Relieve the financial & emotional strain of being away from home



“You gave us a home when we had none in our time of need.”

Fisher House Facts

- 43 Fisher Houses nationwide, plus Germany
- 17 new homes under development
- 2008 Stats
 - 9,500 families served, saved \$12 million in lodging
 - Average stay:
 - 60 days if combat related
 - 16 days if non-combat related
 - Some OIF & OEF veterans longer than 365 days
- A+ rating from American Institute of Philanthropy

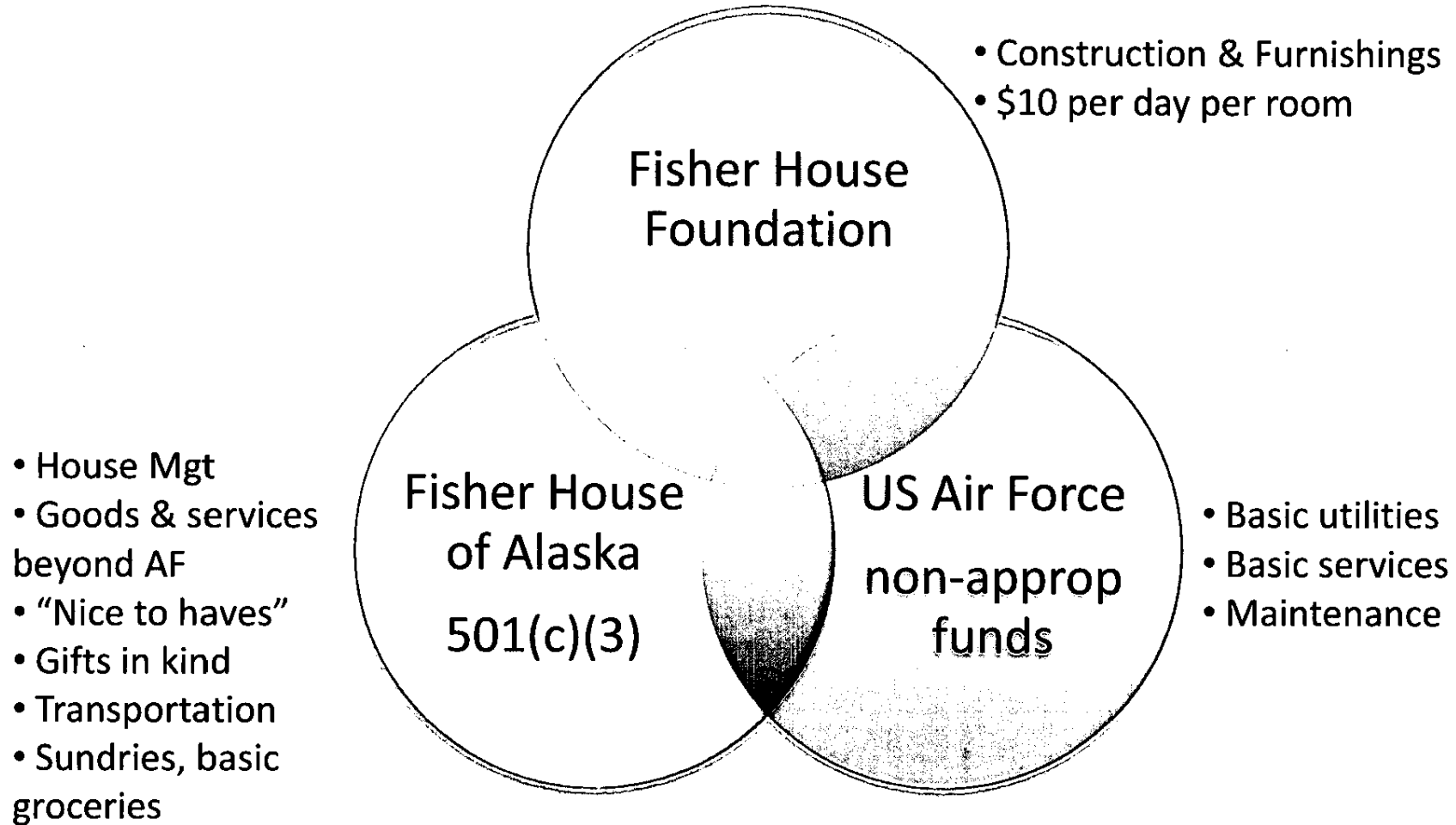
Fisher House of Alaska

- Elmendorf AFB in Anchorage
- On campus of DoD/VA Joint Venture Hospital
- 20 suites, all ADA accessible, elevator
- 16,000 square feet
- Construction Timeline
 - June 2009: Ground cleared, utilities installed
 - May 2010: Ground breaking
 - Early 2012: Grand opening

Fisher House of Alaska

- Will serve all military and veterans in Alaska
 - 88,000 military beneficiaries
 - Active duty & retired, plus dependents
 - VA Clinic next door
 - US Coast Guard
 - US Army in AK
 - 74,000 veterans in AK
 - Veteran population growth 3% a year

Who Pays for What?



No Cost for Families

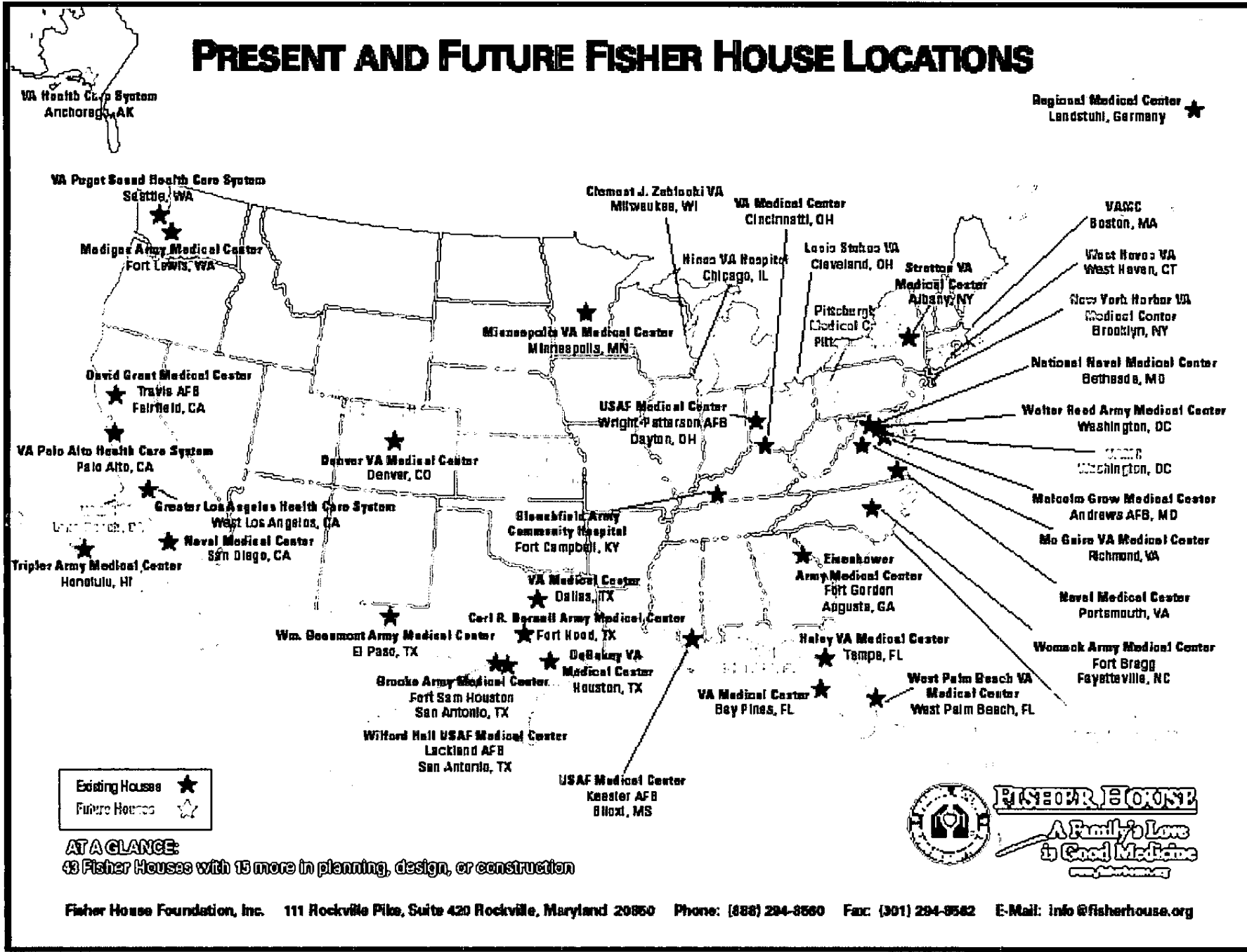
Fisher House of Alaska

- Estimated expense \$50 per night, per room
 - Provided at no cost to family
- Estimated annual budget \$365,000
- Fundraising goal: \$500,000 by grand opening
- Feb 2010: 501(c)(3) package submitted to IRS

Fisher House Board Members

- Terry Parks (Chair) - Owner Alaska Aces
- Linda Doyle (Vice Chair) - Community Volunteer
- Pam Bergeson (Secretary) - Lt. Col. USAF Reserve
- Morton Plumb (Treasurer) - COO First National Bank Alaska
- David R. Gomez - Executive Director Armed Services YMCA
- Charlie Huggins - Alaska State Senator
- Alex Spector – Director Alaska VA Healthcare Systems
- George P. Wuerch - Former Mayor of Anchorage

PRESENT AND FUTURE FISHER HOUSE LOCATIONS



Existing Houses ★
 Future Houses ☆

AT A GLANCE:
 48 Fisher Houses with 18 more in planning, design, or construction



FISHER HOUSE
 A Family's Love
 to Good Medicine
www.fisherhouse.org

Fisher House Foundation, Inc. 111 Rockville Pike, Suite 420 Rockville, Maryland 20850 Phone: (888) 294-8660 Fax: (301) 294-8542 E-Mail: info@fisherhouse.org

Fisher House



Serving military & veteran families in their time of need

Department of Veterans Affairs



Health Care Benefits Overview

October 2009



inside

overview
eligibility
enrollment
enrollment priority groups
copay requirements
covered services/
acute care benefits
long-term care benefits
additional VA health benefits



Building on over 50 years of providing quality health care services to our nation's Veterans

Contents



Introduction	3
Overview	3
Overview Frequently Asked Questions	5
Eligibility and Medical Program Benefits	5
VA Health Care Enrollment	7
VA Health Care Enrollment Frequently Asked Questions	12
VA Health Care Enrollment Priority Groups	14
Priority Group Frequently Asked Questions	15
Copays	16
Copay Frequently Asked Questions	17
Covered Services/Acute Care Benefits	18
Covered Services Frequently Asked Questions	20
Long-Term Care Benefits	22
Long-Term Care Benefits Frequently Asked Questions	23
Additional VA Health Benefits	23

Introduction

This guide is designed to provide Veterans and their families with the information they need to understand VA's health care system—eligibility requirements, its enrollment process, including enrollment priority groups, copays that certain Veterans may be charged and the health benefits and services available to help Veterans.

Additionally, inside you will find helpful information about My HealthVet, Creditable Coverage for Medicare Part D, Income Verification and medically related travel benefits.

This brochure is not intended to provide information on all of the health services offered by VA. If we have not addressed your specific questions, additional assistance is available at the following resources:

- ~ Your local VA health care facility's Enrollment Office
- ~ www.va.gov/healtheligibility
- ~ www.myhealth.va.gov
- ~ VA toll-free 1-877-222-VETS (8387)

VA enrollment also allows health care benefits to become completely portable throughout the entire VA system.

very important part of our planning efforts.

Enrollment in the VA health care system provides Veterans with the assurance that comprehensive health care services will be available when and where they are needed during that enrollment period. In addition to the assurance that services will be available, enrolled Veterans welcome not having to repeat the application process—regardless of where they seek their care or how often.



Overview

Today's Veterans have a comprehensive medical benefits package, which VA administers through an annual patient enrollment system. The enrollment system is based on priority groups to ensure that health care benefits are readily available to all enrolled Veterans (see Enrollment Priority Groups on page 14).

Complementing the expansion of benefits and improved access is our ongoing commitment to providing the very best in quality service. Our goal is to ensure that our patients receive the finest quality of health care regardless of the treatment program, regardless of the location. In addition to our ongoing quality assurance activities, we've made it easier for Veterans to get the health care they need. New locations continue to be added to the VA health care system—bringing the total number of treatment sites to over 1,400 nationwide.

As explained further in this guide, most Veterans must be enrolled to receive VA health care. While some Veterans are not required to enroll due to their special eligibility status, all Veterans—including those who have special eligibility—are encouraged to apply for enrollment. Enrollment helps us to determine the number of potential Veterans who may seek VA health care services and is a

Veterans Choose the VA Facility

As part of the enrollment process, Veterans should select the VA health care facility or Community Based Outpatient Clinic (CBOC) to serve as his/her primary treatment facility.

Benefits on the Go

VA enrollment also allows health care benefits to become completely portable throughout the entire VA health care system. Enrolled Veterans who are traveling or who spend time away from their primary treatment facility may obtain care at any VA health care facility across the country without the worry of having to reapply. Veterans with a service-connected condition may receive treatment for that condition even in a foreign country (see Foreign Medical Program on page 19).

Notice of Privacy Practices

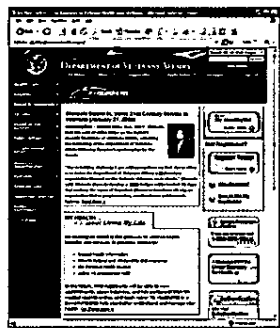
Veterans who are enrolled for VA health care benefits are afforded various privacy rights under federal law and regulations, including the right to a Notice of Privacy Practices. The Veterans Health Administration (VHA) issued the VA Notice of Privacy Practices, IB 10-163, in April 2009. The VA Notice of Privacy Practices provides enrolled Veterans with information on how VHA may use and disclose personal health information.

The Notice also advises enrolled Veterans of their rights to know when and to whom their health information may have been disclosed, request access to or receive a copy of their health information on file with VHA, request an amendment to correct inaccurate information on file and file a privacy complaint. The VA Notice of Privacy Practices may be obtained through the Internet at www.va.gov/vhapublications/viewpublication.asp?pub_id=1089 or through the mail by writing the VHA Privacy Office (19F2), 810 Vermont Avenue NW, Washington, DC 20420.

On-Line Access to VA Health Information and Services

My HealtheVet, www.myhealth.va.gov, is VA's award-winning e-health Web site, which offers Veterans, active duty service members and their dependents and caregivers anywhere,

anytime Internet access to VA health care information and services. My HealtheVet is a free, online Personal Health Record that empowers Veterans to become more informed partners in their health care. With My HealtheVet, America's Veterans can access trusted, secure and informed health and benefits information at their convenience. Veterans may log on to My HealtheVet at www.myhealth.va.gov and begin to better manage their health care and make informed decisions in collaboration with their health care providers. Veterans can also record and store important health and military history information. To register, Veterans simply need to go to www.myhealth.va.gov.



With My HealtheVet, America's Veterans can access trusted, secure, and informed health and benefits information at their convenience.



Please note that the video can also be viewed at your VA facility.

Step 3: Complete the Individuals' Request for a Copy of Their Own Health Information, VA Form 10-5345a, available online at www.va.gov/vaforms/medical/pdf/vha-10-5345a-fill.pdf, or at your medical facility.

Step 4: Take the signed VA Form 10-5345a, along with a valid government issued photo identification card, to a VA staff member assigned to handle authentication.

The facility will verify your name, Social Security number and date of birth.

When this one-time process is completed, the Veteran may have access to My HealtheVet online Personal Health Record for key portions of their VA medical records. Medication names will be available, so Veterans will be able to refill their VA prescriptions by medication name.

New features coming soon will allow Veterans to:

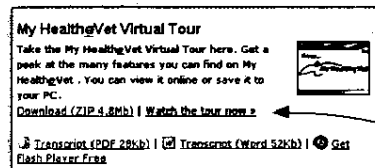
- ~ View VA Appointments
- ~ Obtain personalized VA Appointment Reminders
- ~ Obtain personalized VA Wellness Reminders

Veterans who receive care at a VA facility should ask for In Person Authentication, or "IPA", to obtain an upgraded account that offers additional access to key features of their Personal Health Record.

Contact your VA medical facility's Release of Information section for more information and to find out how to sign up to be authenticated.

Prior to completing the IPA process, you will need to take the following steps:

Step 1: Go to the My HealtheVet Web site at www.myhealth.va.gov and scroll down to:



Step 2: View the My HealtheVet Orientation Video online, or read the MHV Orientation Video transcript.

With My HealtheVet, registrants can access

Refill VA Prescriptions
VA Benefits & Services
Local VA Events & Activities
Personal Health Journals
Vitals Tracking & Graphing
Military Health History
Activity/Food Journals
Healthy Living Centers
VA News & Feature Stories
Disease & Condition Centers
Trusted Health Information

- ~ Communicate with participating health care providers through Secure Messaging
- ~ View lab results

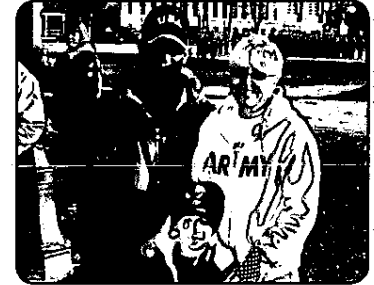


Veterans, active duty service members and others are urged to join hundreds of thousands of enrollees already taking charge of their day-to-day health care by logging on to www.myhealth.va.gov. My Health, My

Care: 24/7 Online Access to VA Health Care and Services. Take charge of your VA health care and log on today: www.myhealth.va.gov.

Eligibility and Medical Program Benefits

Current estimates of the projected growth of women Veterans predict there will be 1.9 million by 2020, up from 1.1 million in 1980.



Basic Eligibility

If you served in the active military, naval or air service and are separated under any condition other than dishonorable, you may qualify for VA health care benefits. Current and former members of the Reserves or National Guard who 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 may be eligible for VA health care as well.

Minimum Duty Requirements

Most Veterans who enlisted after September 7, 1980, or entered active duty after October 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 who were discharged for a disability incurred or aggravated in the line of duty, for a hardship or "early out." Since there are a number of other exceptions to the minimum duty requirements, VA encourages all Veterans to apply so that we may determine their enrollment eligibility.

Women Veterans Eligibility

Current estimates of the projected growth of women Veterans predict there will be 1.9 million by 2020, up from 1.1 million in 1980. Thus, women will continue to make up a larger share of

Frequently Asked Questions



Were there changes to allow more high income veterans to enroll for VA health care?

Yes. On June 15, 2009, VA amended its regulations to expand enrollment of certain Veterans with higher income. Under this new provision, VA is enrolling Priority Group 8 Veterans whose income does not exceed the new VA National Income Thresholds. While this new provision does not remove consideration of income, it does increase income thresholds.

Where can I find the new income thresholds?

Because of the changes to the income thresholds each year, they are not published in this brochure. However, the income threshold tables can be viewed on-line at www.va.gov/healtheligibility/library/annualthresholds.asp

How can I verify my enrollment?

To verify your enrollment, call us toll-free at 1-877-222-VETS (8387) to get the facility's telephone number.

the Veteran population, add to its diversity, and require Veteran services geared to their specific needs.

Women Veterans may receive the full spectrum medical benefits package. They also receive the full continuum of comprehensive medical services, including health promotion and disease prevention, primary care, women's gender-specific health care, for example, hormone replacement therapy, breast and gynecological care, limited maternity and infertility (excluding in-vitro fertilization), acute medical/surgical, emergency and substance abuse treatment, mental health, domiciliary, rehabilitation and long-term care.



Readjustment Counseling Services

VA provides readjustment counseling and outreach services to all Veterans who served in any combat zone, through community based counseling centers called Vet Centers. Services are also available for their family members for military related issues. Veterans have earned these benefits through their service and all are provided at no cost to the Veteran or family. The Vet Centers are staffed by small multidisciplinary teams of dedicated personnel, many of whom are combat Veterans themselves. Vet Center staff are available toll-free during normal business hours at 1-800-905-4675 (Eastern) and 1-866-496-8838 (Pacific). For information online, visit www.vetcenter.va.gov.

VA provides readjustment counseling and outreach services to all Veterans who served in any combat zone...

Why should I call the Lifeline?

From immediate suicidal crisis to information about mental health, crisis centers in our network are equipped to take a wide range of calls. Some of the reasons to call 1-800-273-TALK are listed below.

- ~ Call to speak with someone who cares
- ~ Call if you feel you might be in danger of hurting yourself
- ~ Call to find referrals to mental health services in your area
- ~ Call to speak to a crisis worker about someone you're concerned about

Medically Related Travel Benefits

Veterans may qualify for travel payments if they fall into one of the following categories:

- ~ Have a service-connected disability rating of 30 percent or more
 - ~ Are traveling for treatment of a service-connected condition
- ~ Receive a VA pension
- ~ Are traveling for a scheduled compensation or pension examination
- ~ Does not have income that exceeds the maximum annual VA pension rate
- ~ Veterans meeting the above conditions may also be provided special mode travel (e.g., wheelchair van, ambulance) based on a clinical determination of need (authorization is not required for emergencies if a delay would endanger their life or health).



Suicide Prevention Lifeline

1-800-273-TALK (8255) Veterans Press 1

The **National Suicide Prevention Lifeline** is a 24-hour, seven days a week, toll-free suicide prevention service available to anyone in suicidal crisis. **If you need help, please dial 1-800-273-TALK (8255).** You will be routed to the closest possible crisis center in your area. With more than 130 crisis centers across the country, our mission is to provide immediate assistance to anyone seeking mental health services. Call for yourself, or someone you care about. Your call is free and confidential.

VA has launched a pilot on-line Chat Service, in partnership with Lifeline: suicidepreventionlifeline.org/veterans/default.aspx. The Veterans Chat Service, available 24 hours a day/7 days a week, is located at the VA National Suicide Prevention Hotline.

Veterans Chat
Operating Hours: 24 hours a day 7 days a week

Click to...
CHAT ONLINE

Are you a veteran in emotional distress?
If so, chat live with a crisis counselor and get help.

Mileage Rates and Deductibles

General Travel

Mileage rates are \$0.415 (41.5 cents) per mile.
(subject to change)

Scheduled and Unscheduled Appointments/Visits

Scheduled appointments qualify for round-trip mileage.

Unscheduled visits may be limited to return mileage only.

Deductibles

Deductible is \$3.00 one way (\$6.00 round trip).

Deductible requirement is subject to a monthly cap of \$18.00.

Upon reaching \$18.00 in deductibles or 6 one-way (3-round) trips, whichever comes first, travel payments made for the balance of that particular month will be free of deductible charges.

Waiver of Travel Deductible

A waiver of the deductible will be provided if the Veteran is eligible for travel and:

They are in receipt of a VA pension.

They are a nonservice-connected Veteran and their previous year's income does not exceed, or their projected current calendar year's income will not exceed the applicable VA pension rate.

They are a service-connected Veteran and their previous year's income does not exceed, or their projected current calendar year's income will not exceed the applicable national means test income threshold.

They are traveling for a scheduled compensation and pension exam.



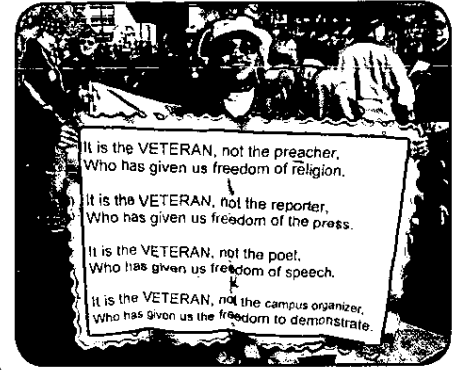
VA Health Care Enrollment

Veterans can apply for enrollment in the VA health care system by completing VA Form 10-10EZ, APPLICATION FOR HEALTH BENEFITS. The application form can be obtained by visiting, calling or writing any VA health care facility or Veterans' benefits office. Forms can also be requested by calling VA toll-free at 1-877-222-VETS (8387) or accessed from our Web site at www.va.gov/1010ez.htm. In addition, many military treatment facilities have VA representatives on staff that can also help you with this request.

Completed applications may be submitted in person or by mail to any VA health care facility. If you apply in person at a VA health care facility, VA staff will do a preliminary assessment of your priority group.

You may request an appointment at the time you apply in person, or if completing an application online or mailing your application, by checking "yes" to the question asking if you want an appointment with a VA doctor or provider as soon as one becomes available. After your application is processed, the VA Health Eligibility Center in Atlanta will notify you via mail of your enrollment status and priority group assignment. If you requested an appointment, your preferred facility will schedule an appointment for you and notify you of the appointment by mail. If you need health care before your scheduled appointment, you may contact

*New regulations
have enabled VA
to relax income
restrictions on
enrollment for
health benefits.*



the Enrollment Coordinator at your local VA medical facility. Emergent health care is also available to you (for more information, go to page 20, Covered Services FAQ for emergency care).

Priority Group 8 Enrollment Relaxation

New regulations went into effect on June 15, 2009 which enabled the Department of Veterans Affairs (VA) to relax income restrictions on enrollment for health benefits.

While this new provision does not remove consideration of income, it does increase income thresholds. You may be eligible for enrollment under this new provision. The new VA National Income Thresholds can be found on line at www.va.gov/healtheligibility/library/annualthresholds.asp.

An Enrollment Calculator is available to help Veterans determine their potential eligibility for VA health care services under the proposed regulation. Check to see if you qualify under the new rules for VA health care at www.va.gov/healtheligibility/apps/enrollmentcalculator.

Enrollment Restriction

Although the new income relaxation regulation described above allow certain higher-income Veterans to be enrolled in the VA health care system, the previous Enrollment Restriction, effective January 17, 2003, by which VA suspended NEW enrollment of



Veterans assigned to Priority Groups 8e and 8g is still in effect (VA's lowest priority group consisting of higher income Veterans). However, VA encourages Veterans in these priority groups to reapply for enrollment. They may now qualify if their current household income exceeds the applicable income thresholds by 10% or less, under the new regulation.

Veterans are assigned to Priority Groups 8e and 8g based on the following:

- ~ The Veteran does not have any special qualifying eligibility, such as a compensable service-connected disability
- ~ The Veteran's household income exceeds the current year VA income threshold and the geographic income threshold for the Veteran's residence
- ~ New Veterans who decline to provide their financial information
- ~ Veterans enrolled in Priority Groups 8a and 8c **on or before** January 16, 2003, remain enrolled and continue to be eligible for the full-range of VA health care benefits

Changes in VA's available resources may affect the number of priority groups VA can enroll in a given year. If that occurs, VA will publicize the enrollment changes and notify affected enrollees.

IMPORTANT: Veterans who may otherwise be ineligible for enrollment based on income may still be eligible based on a VA Catastrophically Disabled determination or due to loss of income or other economic factor by applying for a Hardship determination.

For further information please contact VA at 1-877-222-VETS (8387).

VA medical center has a team ready to welcome OEF/OIF service members and help coordinate their care.

Combat Veterans— Returning Service Members (OEF/OIF)

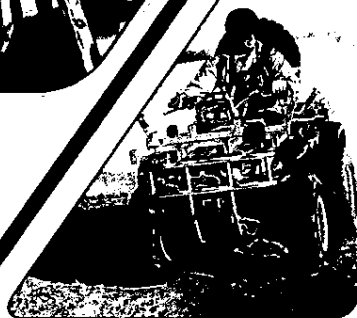
VA is ready to provide health care and other medical services to our nation's returning OEF/OIF service members. Every VA medical center has a team ready to welcome OEF/OIF service members and help coordinate their care. For more information about the various programs available for recent returning service members, log on to the Returning Service Members web site at www.oefoif.va.gov/howdoigethelp.asp

Combat Veterans who served in a theater of combat operations after November 11, 1998 are eligible for enrollment in Priority Group 6, unless eligible for a higher Priority Group, and are not charged copays for medications and/or treatment of conditions that are potentially related to their combat service. Veterans who enroll with VA under this enhanced authority will continue to be enrolled even after their enhanced eligibility period ends, although they may be shifted to Priority Group 7 or 8, depending on their income level, and required to make applicable copays.

- ~ Combat Veterans discharged from active duty on or after January 28, 2008, are eligible for this enhanced enrollment health benefit for five years after the date of their most recent discharge from active duty.
- ~ Combat Veterans who have not yet enrolled and were discharged from active duty between November 11, 1998, and January 27, 2003, may apply for this enhanced enrollment opportunity through January 27, 2011.

Financial Assessment (Means Testing)

While many Veterans qualify for enrollment and cost-free health care services based on a compensable service-connected condition or other qualifying factor, most Veterans will be asked to complete a financial assessment as part of their enrollment



application process. Otherwise known as the Means Test, this financial information may be used to determine the applicant's enrollment priority group (see Enrollment Priority Groups section) and whether he/she is eligible for cost-free VA health care. Higher-income Veterans may be required to share in the expense of their care by paying copays (Refer to the Copay section of this booklet on page 16).

Veterans may also submit a financial assessment to determine their eligibility for cost-free medications and travel benefits. Income threshold information can be found online at: www.va.gov/healtheligibility/library/pubs/vaincomethresholds/vaincomethresholds.pdf, or you may contact the Enrollment Coordinator at your local medical facility.

Due to VA's restricting enrollment of new Priority Groups 8e and 8g, Veterans applying for enrollment who do not have any other special eligibility qualifying factors and decline to provide financial information, will not be accepted for enrollment.



Geographically-Based Means Testing

Recognizing that the cost of living can vary significantly from one geographic area to another, Congress added income thresholds based on geographic locations to the existing VA national income thresholds for financial assessment purposes.

This assists lower-income Veterans who live in high-cost areas by providing an enhanced enrollment priority and reducing the amount of their required inpatient copay.

Geographically-based copay reductions apply **ONLY** to **INPATIENT SERVICES**. Outpatient services, long-term care, as well as medication copays are **NOT** affected by this provision.

Catastrophically Disabled

To be considered catastrophically disabled, Veterans must have a severely disabling injury, disorder or disease that permanently compromises their ability to carry out the activities of daily living. The disability must be of such a degree that Veterans require personal or mechanical assistance to leave home or bed, or require constant

supervision to avoid physical harm to themselves or others. Veterans may request a catastrophic disability evaluation by contacting the Enrollment Coordinator at their local VA health care facility. VA will make every effort to schedule an evaluation within 35 days of the request. There is no charge for the Catastrophic Disability evaluation. If it is determined by a VA health care provider that a Veteran is catastrophically disabled, their priority will be upgraded to Priority Group 4. If, however, the Veteran was previously required to make copays, that requirement will continue until their financial situation qualifies them for cost-free services.



NOTE: A Veteran who may not be eligible for enrollment due to VA's current enrollment restriction will be afforded enrollment and placement into Priority Group 4 if found to be Catastrophically Disabled.

Income Verification

Veterans Health Administration's Income Verification (IV) program verifies earned and unearned total gross household income provided by non-service-connected Veterans and Veterans rated non-compensable 0% service-connected by VA who are required to complete a financial assessment (means test).

The financial assessment is based on the Veteran's previous year gross household income and is used to determine their eligibility for VA health care benefits and in many cases, their priority group assignment. The income information provided by the Veteran is verified by matching with records from the Internal Revenue Service and the Social Security Administration.



If the IV process confirms the Veteran's household income exceeds the established VA national income (means test) thresholds, the Veteran may be determined responsible for copays for health care provided since the date of completion of the initial financial assessment. In addition, if the Veteran enrolled on or after January 17, 2003, the Veteran's enrollment could become denied. As a result, the Veteran would no longer be eligible for VA health care for treatment of their non-service-connected conditions. (For more information, refer to the Enrollment Restriction section on page 7 of this booklet or log on to www.va.gov/healtheligibility/iv).

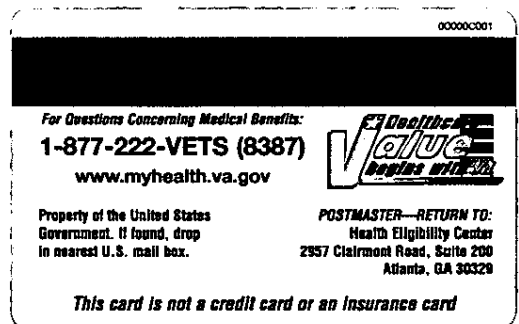
Financial Hardships

If you are a veteran who is suffering from financial distress, struggling to pay your VA copays lost your job or currently face significant decrease in your household income, VA has programs that can help you. Additionally, VA's Medical Care Hardship program could help Veterans qualify for VA enrollment for health care services if they had a recent change in their income, even if they were previously denied enrollment based on their household income. Veterans who have put off applying for VA enrollment because they thought their income was too high may want to reconsider applying if their projected current year's income is lower. Hardship may be approved if the Veteran's current year income is substantially reduced from the prior year. Personal circumstances such as loss of employment, sudden decrease in income or increases in out-of-pocket veteran or family health care expenses factor into VA's hardship determination. If you are a Veteran and unable to pay your copay charges, you should discuss the matter with the Revenue Office at the VA health care facility where you received your care.

You must contact the facility where you received the care to request one of these options or call VA at 1-877-222-VETS (8387).



Four possible options for Veterans unable to pay assessed copay charges	
Hardship Determination	If a Veteran's current year income is substantially reduced from the prior year. Future exemption from medical and hospital care copays for a determined period of time (Please see your local Enrollment Coordinator for Hardship consideration).
Waiver	If there has been a significant change in income or significant expenses for medical care for Veteran or other family members, funeral arrangements or Veteran educational expenses. Waiver is for past debts only.
Offer in Compromise	Offer for past debts only and acceptance of a partial payment in settlement and full satisfaction of debt.
Repayment Plans	Payment of past debt over a period of 12 months.



The VIC does not contain any sensitive, identifying information such as the Veteran's Social Security number or date of birth on the face of the card.

Veterans Identification Card

VA provides eligible Veterans a Veterans Identification Card (VIC) for use at VA health care facilities. This card provides quick access to VA health benefits, and VA recommends that all enrolled Veterans obtain a card.

Veterans may have their photo taken at their local VA health care facility. Once the Veteran's enrollment has been verified, the card will be mailed to the Veteran's mailing address, usually within five to seven days. Veterans may call toll-free 1-877-222-VETS (8387) to check on the status of their card. In the event the card is lost or destroyed, a replacement card may be requested by contacting the VA where the picture was taken. NOTE: VICs cannot be used as a credit or an insurance card and it does not authorize or pay for care at non-VA facilities.

The VIC does not contain any sensitive, identifying information such as the Veteran's Social Security number or date of birth on the face of the card. However, that information is coded into the magnetic stripe and barcode. For that reason, VA recommends that Veterans safeguard their VIC as they would a credit card.

Updating Your Information

VA Form 10-10EZR, Health Benefits Renewal Form, is for Veterans who are currently enrolled and need to update or report changes to their address, phone number, name, health insurance and financial information.

Veterans who are not charged copays for medications or health care and those who are charged reduced inpatient copays should update and report their financial information to VA each year to prevent their status from lapsing. VA will remind Veterans when it is time to renew the information.

However, it is not necessary to wait for the annual renewal period to provide VA updated information. Veterans may update their information whenever their financial or personal information changes, by completing VA Form 10-10EZ and mailing it to their **local facility** for processing (you can find your local facility address online at www.va.gov/directory) or by calling VA at 1-877-222-VETS (8387). Be sure to sign and date the form. If the form is not signed and dated properly, VA will return it to you for completion.

The 10-10EZ can be requested by calling VA toll-free 1-877-222-VETS (8387) or obtained on-line at www.va.gov/vaforms/medical/pdf/vha-10-10ezr-fill.pdf.

Private Health Insurance

Since VA health care depends primarily on annual congressional appropriations, VA encourages Veterans to retain any health care coverage they may already have—especially those in the lower enrollment priority groups described on pages 14 and 15, Enrollment Priority Groups. Veterans with private health insurance or with federally funded coverage through the Department of Defense (TRICARE), Medicare or Medicaid may choose to use these sources of coverage as a supplement to their VA benefits. It is important to note that VA health care is NOT considered a health insurance plan.

By law, VA is obligated to bill health insurance carriers for services provided to treat a Veteran's non service-connected conditions.

To ensure that current insurance information is on file—including coverage through the Veteran's spouse—VA staff is required to ensure that Veterans' health insurance information is updated during each visit. Identification of insurance information is essential to VA because collections received from insurance companies help supplement the funding available to provide services to Veterans.

Veterans are asked to cooperate by disclosing all relevant health insurance information. Eligible Veterans are not responsible for payment of VA medical services billed to their health insurance company that are not paid by their insurance carrier.



... VA encourages Veterans to retain any health care coverage they may already have...



coverage is at least as good as the Medicare Part D coverage. Since only Veterans may enroll in the VA health care system, dependents and family members do not receive credible coverage under the Veteran's enrollment.

However, there is one significant area in which VA health care is NOT credible coverage: Medicare Part B (outpatient health care, including doctors' fees). Creditable coverage for Medicare Part B can only be provided through an **employer**. As a result, VA health care benefits to Veterans are not credible coverage for the Part B program. So although a Veteran may avoid the late enrollment penalty for Medicare Part D by citing VA health care enrollment, that enrollment would not help the Veteran avoid the late enrollment penalty for Part B.

VA does not recommend that Veterans cancel or decline coverage in Medicare (or other health care or insurance programs) solely because

CAUTION!

Before canceling insurance coverage, enrolled Veterans should carefully consider the risks.

There is no guarantee that in subsequent years Congress will appropriate sufficient funds for VA to provide care for all enrollment priority groups.

Non-Veteran spouses and other family members generally do not qualify for VA health care.

If participation in Medicare Part B is cancelled, it cannot be reinstated until January of the next year, and there may be a penalty for the reinstatement.

Insurance Collections

Since the start of insurance collections in 1986, Veterans' health care services have been supplemented by funds collected from private health insurance companies. This supplement has allowed VA to provide services to numerous additional Veterans.

Medicare Part D Prescription Drug Coverage/Creditable Coverage

If you are eligible for Medicare Part D prescription drug coverage, you need to know that enrollment in the VA health care system is considered **credible coverage** for Medicare Part D purposes.

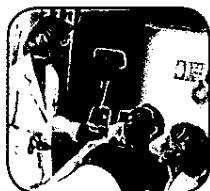
This means that VA prescription drug coverage is at least as good as the Medicare Part D coverage. Since only Veterans may enroll in the VA health care system, dependents and family members do not receive credible coverage under the Veteran's enrollment.

they are enrolled in VA health care. Unlike Medicare, which offers the same benefits for all enrollees, VA assigns enrollees to priority levels, based on a variety of eligibility factors, such as service-connection and income. There is no guarantee that in subsequent years Congress will appropriate sufficient medical care funds for VA to provide care for all enrollment priority groups. This could leave Veterans, especially those enrolled in one of the lower-priority groups, with no access to VA health care coverage. For this reason, having a secondary source of coverage may be in a Veteran's best interest.

In addition, a Veteran may want to consider the flexibility afforded by enrolling in both VA and Medicare. For example, Veterans enrolled in both programs would have access to non-VA physicians (under Medicare Part A or Part B) or may obtain prescription drugs that are not on the VA formulary if prescribed by non-VA physicians and filled at their local retail pharmacies (under Medicare Part D).

Additional information on Medicare Part D prescription drug coverage can be found online at www.va.gov/healtheligibility/costs/medicaredfs.asp or the Health and Human Services Medicare website at www.medicare.gov.

Frequently Asked Questions



...a Veteran may want to consider the flexibility afforded by enrolling in both VA and Medicare.

Must I reapply every year, and will I receive an enrollment confirmation?

Depending on your priority group and the availability of funds for VA to provide health benefits to all enrollees, your enrollment will be automatically renewed without any action on your part. Veterans who are exempted from paying medical care copays or who are eligible for a reduced inpatient copay are required to update their financial information and are still required to provide their income information on an annual basis or when their income changes, using VA Form 10-10EZ. Should there be any change to your enrollment status, you will be notified in writing.

Can I request a Veterans Identification Card and/or an appointment before my enrollment is confirmed?

Yes. If you are applying in person at any VA medical center, you can have your picture taken for the Veterans Identification Card and/or request an appointment for medical care at the same time you apply for enrollment. Additionally, you can indicate on the VA Form 10-10EZ if you desire an appointment and when your application is processed at the medical center, an appointment will be scheduled for you. You will be notified in writing of the appointment and your eligibility for medical care. Once your enrollment has been verified the identification card will be mailed to you, usually in 5-7 days after your enrollment has been verified. For Veterans 50% or more disabled from service-connected conditions and Veterans requesting care for a service-connected disability, those appointments have a higher priority (see Enrollment Priority Groups on pages 14-15) and will be scheduled within 30 days of the desired date. Veterans may be seen at VA facilities for emergency care while pending verification.

What if I cannot keep an appointment?

VA asks that you help us provide timely service. If you cannot keep your appointment, please notify your facility as soon as possible so they can schedule another appointment for you, and use your cancelled appointment slot for another Veteran.

If enrolled, must I use VA as my exclusive health care provider?

There is no requirement that VA become your exclusive provider of care. If you are a Veteran who is receiving care from both a VA provider and a private community provider, it is important for your health and safety that your care from both providers be coordinated, resulting in one treatment plan (comanaged care). Please be aware that our authority to pay for non-VA care is extremely limited (see pages 20 and 21). You may, however, elect to use your private health insurance benefits as a supplement for your VA health care benefits.

I am moving to another state. How do I transfer my care to a new VA health care facility?

If you want to transfer your care from one VA health care facility to another, contact the Enrollment Office for assistance in transferring your records and establishing a new appointment.

How do I choose a preferred facility? How do I change my preferred facility?

When you enroll, you will be asked to choose a preferred VA facility. This will be the VA facility where you will receive your primary care. You may select any VA facility that is convenient for you. If the facility you choose cannot provide the health care that you need, VA will make other arrangements for your care, based on administrative eligibility and medical necessity. If you do not choose a preferred facility, VA will choose the facility that is closest to your home.

You may change your preferred facility at any time. Simply discuss this with your primary care doctor. Your primary care doctor will coordinate your request with the Veterans Service Center at your local health care facility and make the change for you.

What income is counted for the Financial Assessment (Means Test) & is family size considered?

VA considers your previous calendar year's gross household income and net worth. This includes the earned and unearned income and net worth of your spouse and dependent(s). Earned income is usually wages you receive from working. Unearned income can be interest earned, dividends received, money from retirement funds, Social Security payments, annuities or earnings from other assets. The number of persons in your family will be factored into the calculation to determine the applicable income threshold—both the VA national income threshold and the income threshold for your geographic region.

What is a geographic income threshold?

By law, VA is required to identify Veterans who are required to defray the cost of medical care. Those Veterans whose income falls between the VA means test limits and the VA national geographic income threshold for the Veteran's locale will have their inpatient medical care copays reduced by 80%. Higher-income Veterans may be responsible to pay the full inpatient copays.

For those Veterans who have more than one residence, which address is used for means testing under the geographically-based income thresholds?

The address used to determine your geographically-based income threshold is your permanent address and typically is the location where you declare residency for voting and tax purposes. To view geographic income thresholds, visit www.va.gov/healtheligibility/library/pubs/gmtincomethresholds.

How frequently are the VA national income thresholds updated?

VA national income thresholds, used for the Financial Assessment as well as for geographic adjustments for high cost-of-living areas, are updated annually. To view the current income thresholds, visit www.va.gov/healtheligibility/library/annualthresholds.asp.

Does Income Verification have access to my income tax return?

No, VA does not have access to your tax return. The Internal Revenue Service (IRS) and the Social Security Administration (SSA) share earned and unearned income data reported by employers and financial institutions.

As a combat Veteran, will I be required to provide financial information and be billed?

No. Combat Veterans are not required to provide their financial information to determine their enrollment priority. However, they are encouraged to complete a financial assessment to determine if they are responsible for copays for care or medications unrelated to their combat service.

If I decline to provide income and agree to make copays, will you still verify my income?

No, if you have agreed to make copays for care, you are not required to provide your income information, and we will not make any further attempts to verify your income for that year. However, Veterans who have no special eligibility and decline to provide income information are denied enrollment.



What happens if at the end of the process my income is verified to be higher than the income thresholds?

Your copay status will be changed from copay exempt to copay required. VA facilities involved in your care will be notified of your change in status and to initiate billing for services provided during that income year. Your enrollment priority status may be changed if your financial status is adjusted by the income verification (IV) process. If your enrollment status is changed, you will be notified by mail.

What if I receive a bill and cannot pay?

If you are unable to pay your bill, you should discuss the matter with the Revenue Office at the VA health care facility where you received your care. There are four possible options that may be available to you:

Hardship Determination—If a Veteran's current year income is substantially reduced from the prior year. Future exemption from medical and hospital care copays for a determined period of time. (Must see Enrollment Coordinator for Hardship consideration.)

Waiver—If there has been a significant change in income or significant expenses for medical care for the Veteran or other family members, funeral arrangements or Veteran educational expenses. Waiver is for past debts only.

Offer in Compromise—Offer for past debts only and acceptance of a partial payment in settlement and full satisfaction of debt.

Repayment Plans—Payment of past debt generally over a period of 12 months.

You must contact the facility at which you received the care to request one of these options.

VA Health Care Enrollment Priority Groups



Upon receipt of a completed application, the Veteran's eligibility will be verified. Based on his/her specific eligibility status, he/she will be assigned to one of the following priority groups. The priority groups range from 1 through 8 with Priority Group 1 being the highest priority and Priority Group 8 the lowest.

Priority Group 1

Veterans with service-connected disabilities rated 50% or more disabling

Veterans determined by VA to be unemployable due to VA service-connected conditions

Priority Group 2

Veterans with VA service-connected disabilities rated 30% or 40% disabling

Priority Group 3

Veterans who are former POWs

Veterans awarded the Purple Heart Medal

Veterans whose discharge was for a disability that was incurred or aggravated in the line of duty

Veterans with VA service-connected disabilities rated 10% or 20% disabling

Veterans awarded special eligibility classification under Title 38, U.S.C., Section 1151, "benefits for individuals disabled by treatment or vocational rehabilitation"

Priority Group 4

Veterans who are receiving VA aid and attendance or housebound benefits

Veterans who have been determined by VA to be catastrophically disabled

Priority Group 5

Non service-connected Veterans and noncompensable service-connected Veterans rated 0% disabled whose annual income is below the established VA Means Test thresholds

Veterans receiving VA pension benefits

Veterans eligible for Medicaid benefits

Priority Group 6

World War I Veterans

Compensable 0% service-connected Veterans

Veterans exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki

Project 112/SHAD participants

Veterans who served in a theater of combat operations after November 11, 1998, as follows:

- Veterans discharged from active duty on or after January 28, 2003, who were enrolled as of January 28, 2008, and Veterans who apply for enrollment after January 28, 2008, for five years post discharge
- Veterans discharged from active duty before January 28, 2003, who apply for enrollment after January 28, 2008, until January 27, 2011

Priority Group 7

Veterans with income ABOVE the VA national income threshold and income BELOW the geographic income threshold who agree to pay copays

Priority Group 8

Veterans with income ABOVE the VA national income threshold and the geographic income threshold who agree to pay copays

Veterans eligible for enrollment: Noncompensable 0% service-connected and:

- Subpriority a: Enrolled as of January 16, 2003, and who have remained enrolled since that date and/or placed in this subpriority due to changed eligibility status
- Subpriority b: Enrolled on or after June 15, 2009 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less

Veterans eligible for enrollment: Nonservice-connected and:

- Subpriority c: Enrolled as of January 16, 2003, and who have remained enrolled since that date and/or placed in this subpriority due to changed eligibility status
- Subpriority d: Enrolled on or after June 15, 2009 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less

Veterans not eligible for enrollment: Veterans not meeting the criteria above:

- Subpriority e: Noncompensable 0% service-connected
- Subpriority g: Nonservice-connected

Frequently Asked Questions

What is a VA service-connected rating, and how do I establish one?

A service-connected rating is an official ruling by VA Regional Office that your illness or condition is directly related to your active military service. VA Regional Offices are also responsible for administering educational benefits, vocational rehabilitation and other benefit programs, including home loans. To obtain more information or to apply for any of these benefits, contact your nearest VA Regional Office at 1-800-827-1000 or visit us online at www.va.gov.

Who does VA consider to be "catastrophically" disabled?

A Veteran who has a permanent, severely disabling injury, disorder or disease that compromises the ability to carry out the activities of daily living to such a degree that he/she requires personal or mechanical assistance to leave home or bed or requires constant supervision to avoid physical harm to self or others (see Catastrophically Disabled on page 9).

Copays



While many Veterans qualify for cost-free health care services based on a compensable service-connected condition or other qualifying factor, most Veterans are asked to complete an annual financial assessment, to determine if they qualify for cost-free services. Veterans whose income exceed the established income threshold as well as those who choose not to complete the financial assessment must agree to pay required copays to become eligible for VA health care services.

Types of Copays

Outpatient Copays*—based on the highest of two levels of service on any individual day.

Primary Care Services—Services provided by a primary care clinician (lower level of service)

Specialty Care Services—Services provided by a clinical specialist such as:

surgeon

radiologist

audiologist

optometrist

cardiologist

and specialty tests such as:

magnetic resonance imagery (MRI)

computerized axial tomography (CAT) scan

nuclear medicine studies (highest level of service)

**There is no copay requirement for preventive care services such as screenings or immunizations.*

Medication Copays*—applicable to each prescription, including each 30-day supply or less of maintenance medications.

**Includes an annual cap for enrollment priority groups 2 through 6.*

Inpatient Copays—in addition to a standard copay charge for each 90 days of care within a 365-day period regardless of the level of service (such as intensive care, surgical care or general medical care); a per diem (daily) charge will be assessed for each day of hospitalization.

Long-Term Care Copays*—based on three levels of care (see Long-Term Care Benefits on page 22 for definitions).

Community Living Centers (Nursing Home) Care/
Inpatient Respite Care/Geriatric Evaluation

Adult Day Health Care/Outpatient Geriatric
Evaluation/Outpatient Respite Care

Domiciliary Care

**Copays for Long-Term Care services start on the 22nd day of care during any 12-month period—there is no copay requirement for the first 21 days. Actual copay charges will vary from Veteran to Veteran depending on financial information submitted on VA Form 10-10EC.*

NOTE: There are no copays for hospice care provided in any setting.

Annual Changes to Copay Rates

Because the copay rates may change annually—including the annual cap on medication copays—they are published separately. Current year rates can be obtained at any VA health care facility or on the eligibility page on our Web site www.va.gov/healtheligibility/costs.

Which Veterans Are Not Required to Make Copays?

Many Veterans qualify for cost-free health care and/or medications based on:

- ~ Receiving a Purple Heart Medal, or (must pay for meds)
- ~ Former Prisoner of War Status, or (both are free)
- ~ Compensable VA service-connected disabilities, or (0-40% service-connected must take co-pay test to determine status)
- ~ Low income, or
- ~ Other qualifying factors, including treatment related to their military service experience.

Some of the Services Exempt from Inpatient and Outpatient Copays

- ~ Special registry examinations offered by VA to evaluate possible health risks associated with military service
- ~ Counseling and care for military sexual trauma
- ~ Compensation and pension examinations are requested by the Veterans Benefits Administration (VBA). This is a physical exam to determine service-related illness or injuries for determination of a Veteran's entitlement to compensation and pension benefits.

- ~ Care that is part of a VA-approved research project
- ~ Care related to a VA-rated service-connected disability
- ~ Readjustment counseling and related mental health services
- ~ Care for cancer of head or neck caused by nose or throat radium treatments received while in the military
- ~ Individual or Group Smoking Cessation or Weight Reduction services
- ~ Publicly announced VA public health initiatives, for example, health fairs
- ~ Care potentially related to combat service for Veterans that served in a theater of combat operations after November 11, 1998. This benefit is effective for 5 years after the date of Veteran's most recent discharge from active duty.
- ~ Laboratory and electrocardiograms
- ~ Hospice care

Frequently Asked Questions

I am a recently discharged combat Veteran. Must I pay VA copays?

If the services are provided for the treatment of a condition that may be potentially related to your military service in a theater of combat operations, you will not be charged any copays. Currently enrolled combat Veterans have an enhanced enrollment health benefit period of five years from their most recent discharge. New enrollees discharged from active duty on or after January 28, 2008, are eligible for this enhanced enrollment health benefit for five years after the date of their most recent discharge from active duty. Combat Veterans who never enrolled and were discharged from active duty between November 11, 1998, and January 27, 2003, may apply for this enhanced enrollment opportunity through January 27, 2011.

Veterans who qualify under this special eligibility are not subject to copays for conditions potentially related to their combat service. However, unless otherwise exempted, combat Veterans must either disclose their prior year gross household income OR decline to provide their financial information and agree to make applicable copays for care or services VA determines are clearly unrelated to their military service.

How many copay charges may be assessed during a single day?

Veterans may be charged no more than one outpatient copay per day, regardless of the number of health care providers seen in a single day. The amount of the outpatient copay will be based on the highest level of service you received that day. For example, if the Veteran has a specialty care visit and a primary care visit on the same day, the Veteran will be charged only for the specialty care visit because it is a higher level of care. The number of medication copays charged depends on the number of each 30-day supply or less of medication filled. Inpatient copays are based on both a standard charge for each 90 days of care within a 365-day period as well as a per diem (daily) charge. Together, the inpatient copay charges cover all services, including medications. With the exception of medication copays for outpatients, long-term care copays are a single, all-inclusive charge.

Who qualifies for the annual cap on medication copays?

The annual cap on medication copays applies to Veterans in Priority Groups 2 through 6 (Priority Group 1 is exempt from ALL copays). Because of their higher income, Veterans in Priority Groups 7 and 8 do NOT qualify for the medication copay annual cap. For those that qualify, once the annual limit is reached, all subsequent prescriptions filled during the calendar year will be free of the copay requirement.

What are the current copay rates for VA medical services in 2009?

Outpatient Copays

Primary Care Services—services provided by a primary care clinician—\$15

Specialty Care Services—services provided by a clinical specialist—\$50

Inpatient Copays

There are two inpatient copay rates – the full rate and the reduced rate. The reduced inpatient copay rate, which is 80% of the full inpatient rate, applies to Veterans meeting specific income requirements. Both the full inpatient copay rate and the reduced inpatient copay rate are computed over a 365 - day period. Because the Inpatient Copay rates change each year, they are published separately and can be found on line at www.va.gov/healtheligibility/costs/inpatientcopay.asp or contact VA at 1-877-222-VETS (8387) for more information.

Recognizing that the cost of living can vary significantly from one geographic area to another, Veterans living in high cost areas may qualify for a reduced inpatient copay rate. For more information and frequently asked questions about geographic copays, log on to www.va.gov/healtheligibility/library/faqs/gmtfaq.asp. Because the GMT copay rates change each year, they are published separately at www.va.gov/healtheligibility/costs/inpatientcopay.asp, or contact VA at 1-877-222-VETS (8387) for more information.

Medication Copays

Currently, there is an \$8 copay for each 30-day or less supply of medication provided on an outpatient basis for treatment of a non-service-connected condition. These rates are subject to change.

Long Term Care Copays

Long term care copay are based on three levels of care	Inpatient: Up to \$97 per day (Nursing Home, Respite, Geriatric Evaluation)
	Outpatient: \$15 per day (Adult Day Health Care, Respite, Geriatric Evaluation)
	Domiciliary: \$5 per day

What is the copay for a 90-day supply of medication?

Even though a prescription may be written for 90 days, each 30-day or less supply is subject to that year's applicable medication copay rate. A 90-day supply would cost three times the medication copay rate.

Covered Services/Acute Care Benefits

VA provides a robust Medical Benefits Package of health services that is available to all enrolled Veterans

Standard Benefits

Preventive Care Services

- ~ Immunizations
- ~ Physical Examinations (including eye and hearing examinations)
- ~ Health Care Assessments
- ~ Screening Tests
- ~ Health Education Programs

Ambulatory (Outpatient) Diagnostic and Treatment Services

- ~ Medical

- ~ Surgical (including reconstructive/plastic surgery as a result of disease or trauma)
- ~ Mental Health
- ~ Substance Abuse

Hospital (Inpatient) Diagnostic and Treatment Services

- ~ Medical
- ~ Surgical (including reconstructive/plastic surgery as a result of disease or trauma)
- ~ Mental Health
- ~ Substance Abuse

Prescription Drugs (when prescribed by a VA physician)



Limited Benefits

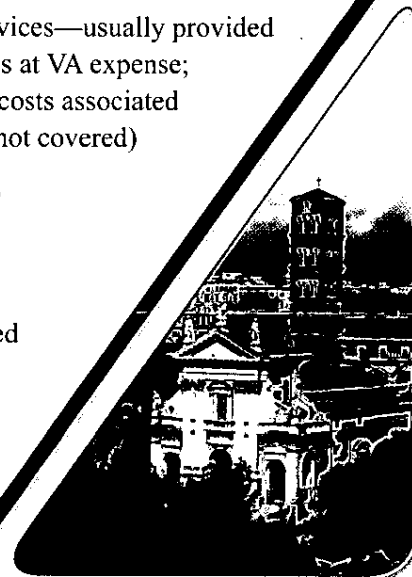
The following care services (partial listing) have limitations and may have special eligibility criteria:

- ~ Ambulance Services
- ~ Dental Care
- ~ Durable Medical Equipment
- ~ Eyeglasses
- ~ Hearing Aids
- ~ Home Health Care
- ~ Maternity and Parturition Services—usually provided in non-VA contracted hospitals at VA expense; care is limited to the mother (costs associated with the care of newborn are not covered)
- ~ Non-VA Health Care Services

General Exclusions (partial listing)

- ~ Abortions and abortion counseling
- ~ Cosmetic surgery, except where determined by VA to be medically necessary for reconstructive or psychiatric care
- ~ Gender alteration
- ~ Health club or spa membership, even for rehabilitation
- ~ In-vitro fertilization
- ~ Drugs, biological and medical devices not approved by the Food and Drug Administration, unless part of formal clinical trial under an approved research program or when prescribed under a compassionate use exemption
- ~ Medical care for a Veteran who is either a patient or inmate in an institution of another government agency if that agency has a duty to provide the care or services
- ~ Services not ordered and provided by licensed/accredited professional staff
- ~ Special private duty nursing

Maternity and Parturition Services—usually provided in non-VA contracted hospitals at VA expense; care is limited to the mother...



VA Foreign Medical Program (FMP)

A health care benefits program for U.S. Veterans with VA-rated service-connected conditions who are living or traveling abroad. Foreign benefits are administered by two separate offices, depending on where the health care services are obtained.

All other countries

Address

Foreign Medical Program
PO Box 469061
Denver CO 80246-9061

Telephone

303-331-7590

Fax

303-331-7803

To contact FMP online

www.va.gov/hac/contact
(see Foreign Medical Program)

Web site

www.va.gov/hac

Veterans in the Philippines

Address

VA Outpatient Clinic (358/00)
2201 Roxas Blvd.
Pasay City 1300
Republic of the Philippines

E-mail

manlopc.inqry@vba.va.gov

Fax

011-632-838-4566



Frequently Asked Questions

Hearing aids and eyeglasses are listed as "limited" benefits. Under what circumstances do I qualify?

VA medical services include diagnostic audiology and diagnostic and preventive eye care services. 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 a former POW or were awarded a Purple Heart. 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 representative of your local VA health care facility.

Am I eligible for dental care?

Veterans are eligible for dental services if:

Their dental care is for a compensable service-connected condition.

They have a dental condition resulting from service-connected trauma.

They have a service-connected rating of 100% or are determined to be unemployable.

They are former POWs.

They are participants in a VA vocational rehabilitation program.

They are enrolled homeless Veterans participating in specific health care programs.

Their dental condition is aggravating a medical problem under VA treatment.

In addition, recently discharged Veterans who served on active duty 90 days or more and who apply for VA dental care within 180 days of separation from active duty may receive a one-time treatment for dental conditions, if the dental condition is shown to have existed at the time of discharge or release and the Veteran's certificate of discharge does not indicate that the Veteran received necessary dental care within a 90-day period prior to discharge or release. This includes Veterans who reentered active military, naval or air service within 90 days after the date of a prior discharge and Veterans whose disqualifying discharge or release has been corrected by competent authority.

Note: Veterans awarded a temporary total disability rating by the Veterans Benefits Administration are not eligible for comprehensive outpatient dental services.

Am I limited to a specific number of inpatient days or outpatient visits during a given period of time?

For acute care services (inpatient days of care and outpatient visits), there are no limits.

Do I qualify for routine health care at non-VA facilities at VA expense?

To qualify for routine care at non-VA facilities at VA expense (otherwise known as Fee Basis care), you must first be given written referral. Included among the factors in determining whether such care will be authorized is your medical condition and availability of VA services within your geographic area. VA copay may be applicable.

Am I eligible for emergency care at a non-VA facility?

An eligible Veteran may receive emergency care at a non-VA health care facility at VA expense when a VA facility or other Federal health care facility with which VA has an agreement is unable to furnish economical care due to the Veteran's geographical inaccessibility to a VA medical facility, or when VA is unable to furnish the needed emergency services.

An emergency is defined as a condition of such a nature that a prudent layperson would have reasonably expected that delay in seeking immediate medical attention would have been hazardous to life or health. VA may directly refer or authorize the Veteran to receive emergency care at a non-VA facility at VA expense, or VA may pay for emergency care furnished certain Veterans by a non-VA facility without prior VA approval under certain conditions.

Are there any payment limitations for non-VA emergency care?

Emergency care must be pre-authorized by VA. When the emergency care is not authorized in advance by VA, it may be considered as preauthorized care when the nearest VA medical facility is notified within 72 hours of admission, the Veteran is eligible, and the care rendered is emergent in nature. Claims for non-VA emergency care not authorized by VA in advance of services being furnished must be timely filed; because timely filing requirements differ by type of claim, you should contact the nearest VA medical facility as soon as possible to avoid payment denial for an untimely filed claim.

Payment may not be approved for any period beyond the date on which the medical emergency ended, except when VA cannot accommodate transfer of the Veteran to a VA or other Federal facility. An emergency is deemed to have ended at that point when a VA physician has determined that, based on sound medical judgment, a Veteran who received emergency hospital care could have been transferred from the non-VA facility to a VA medical center for continuation of treatment.

What type of emergency care can VA authorize in advance?

Subject to eligibility and payment limitations described at the bottom of page 20, VA may preauthorize and issue payment for non-VA emergency care when treatment is needed for:	Inpatient Care	Outpatient Care
The Veteran's VA rated service-connected disability, or for a nonservice-condition that is associated with and aggravating the Veteran's service-connected condition	√	√
A disability for which the Veteran was released from active duty	√	√
Any condition of a Veteran who is rated by VA as Permanently and Totally disabled due to a service connected disability	√	√
Any condition of a Veteran who is an active participant in the VA Chapter 31 Vocational Rehabilitation program, who needs treatment medically determined to make possible the Veteran's entrance into a course of training, or prevent interruption of a course of training which was interrupted due to such illness, injury, or dental condition.	√	√
Any condition for a Veteran who has a VA service-connected disability rating of 50% or greater		√
A condition for which the Veteran has been furnished VA hospital care, nursing home, domiciliary care, or medical services and who requires medical services to complete treatment incident to such care or services		√
Any condition of a Veteran who is in receipt of increased VA pension, or additional VA compensation or allowances based on the need for regular aid and attendance or by reason of being permanently housebound		√
Any condition for a Veteran of World War I.		√
A condition requiring emergency care that developed while the Veteran was receiving medical services in a VA facility or Contract Nursing Home or during VA authorized travel	√	√
Any condition that will obviate the need for hospital admission for a Veteran in the state of Alaska or Hawaii and US Territories, excluding Puerto Rico		√
Any condition for women Veterans.	√	
Any dental services and treatment, and related dental appliances, for Veterans who are former prisoners of war		√

Can VA pay for non-VA emergency care that is not preauthorized?

VA has limited payment authority when emergency care at a non-VA facility is provided without authorization by VA in advance of services being furnished or notification to VA is not made within 72 hours of admission. VA may pay for unauthorized emergency care as indicated below. Since payment may be limited to the point your condition is stable for transportation to a VA facility, the nearest VA medical facility should be contacted as soon as possible for all care not authorized by VA in advance of the services being furnished.

For service-connected Veterans	For nonservice-connected conditions
VA may only pay for emergency care provided in a non-VA facility for certain Veterans who are rated by VA with a service-connected disability. VA may pay for emergency inpatient or outpatient care when treatment is needed for:	VA may only pay for emergency care provided in a non-VA facility for treatment of a nonservice-connected condition only if all of the following conditions are met:
The Veteran's VA rated service connected disability, or for a nonservice-condition that is associated with and aggravating the Veteran's service-connected condition	The episode of care cannot be paid as an unauthorized claim for service-connected Veterans
A disability for which the Veteran was released from active duty	The Veteran is enrolled in the VHA health care system and received VA medical care within a 24 month period preceding the furnishing of the emergency treatment
Any condition of a Veteran who is rated by VA as Permanently and Totally disabled due to a service connected disability	The Veteran is personally liable to the health care provider for the emergency treatment
Any condition of a Veteran who is an active participant in the VA Chapter 31 Vocational Rehabilitation program, who needs treatment medically determined to make possible the Veteran's entrance into a course of training, or prevent interruption of a course of training which was interrupted due to such illness, injury, or dental condition	The Veteran is not entitled to care or services under a health plan contract
	The Veteran has no other contractual or legal recourse against a third party that would, in whole or in part, extinguish the Veteran's liability

Does VA offer compensation for travel expenses to and from a VA facility?

If you meet specific criteria (see Medically Related Travel Benefits on page 6), you are eligible for travel benefits. Travel benefits are subject to a deductible. Exceptions to the deductible requirement are: 1) travel for a compensation and pension examination; and 2) travel by an ambulance or a specially equipped van. Because travel benefits are subject to annual mileage rate and deductible changes, we publish a separate document detailing these amounts each year. You can obtain a copy at any VA health care facility.

Long-Term Care Benefits



Standard Benefits

The following long-term care services are available to all enrolled Veterans.

Geriatric Evaluation

Geriatric evaluation is the comprehensive assessment of a Veteran's ability to care for him/herself, his/her physical health and social environment, which leads to a plan of care. The plan could include treatment, rehabilitation, health promotion and social services. These evaluations are performed by inpatient Geriatric Evaluation and Management (GEM) Units, GEM clinics, geriatric primary care clinics and other outpatient settings.

Adult Day Health Care

The adult day health care (ADHC) program is a therapeutic day care program, providing medical and rehabilitation services to disabled Veterans in a combined setting.

Respite Care

Respite care provides supportive care to Veterans on a short-term basis to give the caregiver a planned period of relief from the physical and emotional demands associated with providing care. Respite care can be provided in the home or other non institutional settings.

Home Care

Skilled home care is provided by VA and contract agencies to Veterans that are homebound with chronic diseases and includes nursing, physical/occupational therapy and social services.

Hospice/Palliative Care

Hospice/palliative care programs offer pain management, symptom control, and other medical services to terminally ill Veterans or Veterans in the late stages of the chronic disease process. Services also include respite care as well as bereavement counseling to family members.

NOTE: There are no copays for hospice care provided in any setting.

Financial Assessment for Long-Term Care Services

For Veterans who are not automatically exempt from making copays for long-term care services (see Copays on page 16),

a separate financial assessment (VA Form 10-10EC, APPLICATION FOR EXTENDED CARE

SERVICES) must be completed to determine whether they qualify for cost-free services or to what extent they are required to make long-term care copays. Unlike copays for other VA health care services, which are based on fixed charges for all, long-term care, copay charges are individually adjusted based on each Veteran's financial status.

Limited Benefits

VA Community Living Centers (VA Nursing Home) Programs

While some Veterans qualify for indefinite Community Living Center (formerly known as nursing home care) services, other Veterans may qualify for a limited period of time. Among those that automatically qualify for indefinite community living care are Veterans whose service-connected condition is clinically determined to require nursing home care and Veterans with a service-connected rating of 70% or more. Other Veterans may be provided short-term community living care, if space and resources are available.

Domiciliary Care

Domiciliary care provides rehabilitative and long-term, health maintenance care for Veterans who require some medical care, but who do not require all the

For those Veterans who do not qualify for cost-free services, the financial assessment for long term care services is used to determine the copay requirement.



services provided in nursing homes. Domiciliary care emphasizes rehabilitation and return to the community. VA may provide domiciliary care to Veterans whose annual income does not exceed the maximum annual rate of VA pension or to Veterans who have no adequate means of support.



Frequently Asked Questions

I already provided financial information on my initial VA application, why is it necessary to complete a separate financial assessment for long-term care?

Unlike the information collected from the financial assessment, which is based on your previous year's income, the 10-10EC is designed to assess your current financial status, including current expenses. This in-depth analysis provides the necessary monthly income/expense information to determine whether you qualify for cost-free long-term care or a significant reduction from the maximum copay charge.

Once I submit a completed VA Form 10-10EC, who notifies me of my long-term care copay requirements?

The social worker or case manager involved in your long-term care placement will provide you with an annual projection of your monthly copay charges.

Assuming I qualify for nursing home care, how is it determined whether the care will be provided in a VA facility or a private nursing home at VA expense?

Generally, if you qualify for indefinite nursing home care, that care will be furnished in a VA facility. Care may be provided in a private facility under VA contract when there is compelling medical or social need. If you do not qualify for indefinite care, you may be placed in a community nursing home—generally not to exceed six months—following an episode of VA care. The purpose of this short-term placement is to provide assistance to you and your families while alternative, long-term arrangements are explored.

For Veterans who do not qualify for indefinite VA Community Living Center care at VA expense, what assistance is available for making alternative arrangements?

When the need for nursing home care extends beyond the Veteran's eligibility, our social workers will help family members identify possible sources for financial assistance. Our staff will review basic Medicare and Medicaid eligibility and direct the family to the appropriate sources for further assistance, including possible application for additional VA benefit programs.

Additional VA Health Benefits

Dependents and Survivors

CHAMPVA—a health care benefits program for:

Dependents of Veterans who have been rated by VA as having a total and permanent disability.

Survivors of Veterans who died from VA-rated service-connected conditions, or who at the time of death, were rated permanently and totally disabled from a VA-rated service-connected condition

Survivors of persons who died in the line of duty and not due to misconduct and not otherwise entitled to benefits under DoD's TRICARE program.

Address	Telephone	Fax
CHAMPVA PO Box 469063 Denver CO 80246-9063	800-733-8387	303-331-7804
To contact CHAMPVA online		Web site:
www.va.gov/hac/contact (see CHAMPVA)		www.va.gov/hac

Children of Women Vietnam Veterans Health Care Benefits

A program designed for women Vietnam Veterans' birth children who are determined by a VA Regional Office to have one or more covered birth defects.

Address	Telephone
Children of Women Vietnam Veterans PO Box 469065 Denver CO 80246-9065	888-820-1756
	Fax 303-331-7807
To contact CWVV online	Web site
www.va.gov/hac/contact (see CWVV)	www.va.gov/hac

Spina Bifida Health Care Benefits

A program designed for Vietnam Veterans' birth children diagnosed with spina bifida and who are in receipt of a VA Regional Office award for spina bifida benefits.

Address	Telephone
Spina Bifida Health Care PO Box 469065 Denver CO 80246-9065	888-820-1756
	Fax 303-331-7807
To contact Spina Bifida online	Web site
www.va.gov/hac/contact (see Spina Bifida)	www.va.gov/hac

For more information on VA health care

Telephone (toll-free): 1-877-222-VETS (8387)

Website: www.va.gov/healtheligibility

To download a copy of this brochure, go to:

www.va.gov/healtheligibility/library/pubs/healthcareoverview

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Veterans Health Administration

599 Chief Business Office

October 2009