The Veterans Health Administration (VHA)

Introduction:

The transition from receiving care within the Military Healthcare System into the Veterans Health Administration can be challenging and at times confusing. Therefore, it is helpful for caregivers to understand some basic differences between the two.

Military health care, known as TRICARE, is operated through the Department of Defense (DOD) and provides medical care for active duty and retired members of the military and their dependents. The Department of Veterans Affairs Veterans Health Administration provides health care for enrolled veterans and their eligible family members through a network of hospitals and clinics across the country.

The two departments work together, but have different eligibility criteria, health benefits and costs.

It is also important to understand that the Veterans Administration is actually three separate organizations: VA Healthcare (VHA), VA Benefits (VBA), and VA National Cemeteries.

For the sake of caregiver and veteran needs, we will focus on the VHA and VBA and the processes and requirements unique to each. Your veterans will engage with both VHA and VBA. VHA provides direct health care while VBA is responsible for compensation and pensions (C&P) paid to your veteran due to their service-connected medical conditions. It is helpful to keep in mind at the outset that these two parts of the VA do not necessarily “talk with each other.” You may find yourself making copies and hand carrying documents between the two (VHA and VBA) which is at times, frustrating but necessary.

An example of how VHA and VBA do come together is if your veteran requests a C&P exam (which may occur any time for conditions that worsen over time). When that occurs the application goes to VBA, they schedule the exams at a VA Medical Center (VAMC), and after the exams are completed VBA will be sent the exams from the VAMC for review. If your veteran has had care at any other VAMC or by a non-VA provider, they can sign a Release of Information which gives permission for the provider to send the records directly to VBA.

What VA Healthcare Is:

The VA health care system provides medical benefits to all enrolled veterans that include preventive and primary care, outpatient and inpatient services, as well as prescription drugs. Based on your veteran’s priority status, the VA provides additional services such as nursing home and dental care; and makes these additional services available to other veterans as space and resources permit. Inpatient and outpatient care is also provided in the private sector to eligible dependents of veterans under the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA). This is termed “fee care.”

Even though the VA is the largest healthcare system in the U.S. do not expect one VA Medical Center or Clinic to be the same where ever you go in the country. Your benefits are the same but how and where they may be delivered to your veteran may vary by clinic, by hospital and by region.

Eligibility for Care:

While the VA provides a wide range of programs and services, the eligibility for care is not “one size fits all” so it is very important that you and your veteran speak to an eligibility coordinator at your local VA
health care facility to talk about your specific situation. The most important document to bring to the VA is the veteran’s DD214, the copy with the type of discharge listed. Typically, eligibility for VA health care is based on previous military service, presence of service-connected disabilities, and/or other factors, including character of discharge. Normally veterans must enroll in the VA healthcare system to receive medical care and once enrolled your veteran will be assigned to one of eight priority categories.

If your veteran was deployed in support of OIF/OEF, they are automatically eligible for VA health care for 5 years. A very important contact for recent veterans is the OIF/OEF/OND Case Manager. All VA medical centers (VAMC) have at least one. They will screen the veteran for case management and other VA services, will assist in navigating the facility, can answer your questions about VA care and identify other resources that may be appropriate. Most veterans who have been in their service’s warrior care program while still on active duty (for example, Marine’s Wounded Warrior Regiment, Army Wounded Warrior Program, etc.) will be assisted in enrolling in VA as part of their transition planning. Recovery Care Coordinators and other service representatives are available to assist your veteran through their recovery and transition to the VA, including VA health care.

It should be noted that not all enrolled veterans obtain all of their health care services from the VA. Your veteran may rely solely on the VA for their care, or may receive their health care services from other sources, such as Medicare, Medicaid, private health insurance, and the military health system, including the TRICARE civilian network. You may find that you have a care plan for your veteran that has services and care included from some or all of these sources. This is not uncommon as the VA itself does not have all of the necessary resources which usually are required for complex care of some veterans.

VA-enrolled veterans do not pay premiums or enrollment fees to receive care from the VA. Health care for a medical condition that is service-connected is at no cost to your veteran. However, the veteran you care for may incur out-of-pocket costs for VA care related to conditions that are not service-connected.

However, your veteran may incur bills for co-pays for their healthcare from the VA or outside entities during the initial phases of their care with the VA (prior to the determination of their service-connected disability rating). You should be aware that these bills will come to the veterans home address for care received until his/her VA disability rating is determined. (For those in the IDES process, this is the rating with all the provisional language removed.) You must hand carry this finalized rating into records at the local VA medical center to ensure that it is recorded for billing purposes. VBA will not send a copy to VHA.

In cases where these bills will be prolonged and may start to accumulate, it is advised that you contact the VA to obtain a waiver of payment or a delay of payment where it may create a hardship. Discuss this with the VA medical center billing office and the veteran’s case manager.

Of special note is that enrollment in the VA healthcare system meets the requirement for having health care coverage under the new health care law, Affordable Care Act (ACA,) that went into effect on 1 Oct 2013. Additional information on the ACA and VA can be found on the VA website: www.va.gov/aca or call 1-877-222-VETS (8387).
Getting Your Veterans Healthcare Appointments in the VA:

Generally, if your veteran is enrolled in the VA for their health benefits, calling the local VA health facility to schedule an appointment is fairly straightforward. If unable to keep an existing appointment, the VA appreciates being contacted as soon as possible as many services have capacity limitations. Contact information is usually given out at enrollment and is facility specific.

When your veteran becomes newly enrolled the application is processed at the medical center, and an appointment will be scheduled, or you may call for an enrollment appointment. Generally, your veteran will receive notification in writing of the appointment and eligibility for medical care. The enrollment coordinator at your local facility will have details if you have questions or concerns.

*Once you have a discharge date, you may call for an enrollment appointment. You can fill out all the enrollment paperwork prior to the discharge date on the DD214, but the request for an initial appointment will not be processed until the date on the DD214 is reached. The first VAMC appointment is usually an initial physical exam. This must be done before any subsequent appointments will be scheduled or referrals for specialty care will be made.*

The appointment waiting times for both primary care and specialty care may vary greatly depending on the location. If you do not receive satisfactory notification in a timely manner, do not hesitate to call back. If extended appointment times remain, or if the local or another close by VA medical center is unable to provide a specific needed service or test, the veteran’s VA physician will make a referral for “fee basis“ care in the community. The VA makes this referral and pays the community provider for the care. If your veteran is not referred out for fee basis care when the physician determines it is needed, you should ask to speak with the facility’s Patient Advocate to assist with the referral.

VA’s Rehabilitative Services:

The VA provides a variety of rehabilitative services for your veteran with the goal of improving their quality of life and providing greater independence. Unfortunately, these services are not located at every VA medical center. To find out where these are located and if they would be right for your veteran for whom you care, you should talk with the primary care physician, case manager, or, for recent veterans, the OIF/OEF Program Manager at your local VA (every VA health facility has a Social Worker in this role who will screen the veteran for case management services and facilitate entry to the VA medical facility). The following are links to the specific rehabilitative services:

Chiropractic Care: [http://www.actonfamilychiros.com/page/veterans.html](http://www.actonfamilychiros.com/page/veterans.html)
Driver Rehabilitation: [http://va.gov/MS/articles/RestoringIndependence](http://va.gov/MS/articles/RestoringIndependence)