DEPARTMENT OF VETERANS AFFAIRS (VA)

lowa City Health Care System



Veterans Health Administration (VHA) Office of Rural Health (ORH)

Co-Managed Care Toolkit



Veterans Rural Health Resource Center-Central Region



Steps to managing the co-managed Veteran

- 1) Collect the Veteran's VA provider information at the very first visit. If they are unsure, have them call the VA and check.
- 2) Send copies of your clinic notes, medications and labs to the VA after every visit with the Veteran. Also make sure to request these documents for your patient each time they come to the VA.
- 3) Check the VA formulary and include appropriate documentation when a Veteran wants to fill your prescription at the VA.
- 4) Advise the patient to understand their VA benefits by meeting with a local benefits coordinator. This will help lower confusion and stress for the Veteran in situations like emergencies.
- 5) Encourage the Veteran to utilize MyHealtheVet to manage their health information.

Thank you for your commitment to providing quality care to our Veterans!



Department of Veterans Affairs

Iowa City VA Health Care System 601 Hwy 6 West Iowa City, IA 52246

Phone: (319) 338-0581 Toll-Free: 1 (800) 637-0128 Website: www.iowacity.va.gov

Department of Veterans Affairs (VA)



Co-Managed Care

Iowa City Health Care System

(319) 338-0581

Co-Managed Care FAQ

What is co-managed care?

Co-managed care, sometimes called dual care, is when a patient receives health care both within the VA and at a non-VA community provider.

How do I get medical information about my patient from the VA?

You may request medical information about an established patient for the purposes of treatment of that patient. The request should be written on your clinic letterhead and faxed to the medical center (not the community outpatient clinics):

Iowa City VA Release of Information Office Fax: (319) 339-7189

New patients should fill out, sign and send in VA form 10-5345 (available online) to the fax number listed above in order to release their medical information to you My patient would like to get a prescription I'm writing filled through the VA. Can they do that? Some outside prescriptions can be filled by the VA. Start by making sure the medication you are requesting is on the VA formulary: http://www.pbm.va.gov/NationalFormulary.asp

If the medication is formulary and the VA provider approves the medication, the information the VA provider needs to accompany the prescription includes:

- A copy of the prescription
- A copy of the paperwork stating the diagnosis related to the prescription
- The History and Physical (H&P) and/or progress notes from the Veteran's most recent visit
- Results of any relevant labs or tests

These documents should be sent to the VA facility where the patient is seen.

I need to contact the Veteran's provider at the VA in regard to the patient's treatment. How do I reach them?

Ask your patient to provide you with the name and contact information of their VA Primary Care Provider/RN Care Manager and their team name/color. This is the easiest way to reach the provider. You may also call the VA operator (319) 338-0581 who can direct you to the primary care team.

Is there anything else the Veteran can do to help me access his or her health information?

Some Veterans have found the VA's online personal health record, MyHealtheVet helpful. Medications, labs and other important health information can be found on this website: <u>www.myhealth.va.gov</u>. This website can be accessed anywhere there is internet as long as the Veteran has his or her log-in information.

What should I advise my comanaged Veteran patient to do in an emergency situation? If a Veteran presents with an emergency, calling 911 is still the right course of action. Once they

are admitted to the hospital they

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DEPARTMENT OF VETERANS AFFAIRS (VA) Iowa City Health Care System 601 Highway 6 West, Iowa City, IA 52246-2208 (319)-338-0581

Dear Colleague,

You are receiving this letter because you may have patients who receive care from both your clinic and at the VA. The information provided in this letter is meant to help facilitate communication and improve patient care between both providers.

Co-managing the Veteran Patient:

We encourage patients to provide you with medical information and reports from VA. Copies of VA records can be provided by the patient, or you can obtain them directly by contacting our VA Release of Information office. Please note that individually-identifiable health information (excluding HIV, sickle cell anemia and drug and/or alcohol abuse) can only be released for treatment purposes.

To request medical records on a patient please fax a written request on your clinic letterhead to the Release of Information Office at the Iowa City VA (319) 339-7189.

Medication through the VA:

There are a few important things to know if the patient would like to fill prescriptions through the VA.

- First, VA pharmacies may only fill prescriptions written by VA providers for VA-approved treatment. VA providers are held responsible for the safety and appropriateness of all the medications that they order.
- Second, prescription medications and supplies prescribed by VA providers are limited to those medications included in the VA National Formulary. VA Formulary items are selected when proven to be clinically and cost effective. You can view the VA National Formulary at this internet link (http://www.pbm.va.gov/NationalFormulary.asp).
- In order to fill formulary prescriptions from non-VA community providers and facilities, the VA must receive the following information from you or from the veteran so that the VA provider can write the prescription to be filled in a VA pharmacy:
 - 1. A copy of the prescription
 - 2. The diagnosis related to the prescription
 - 3. The most recent History and Physical and/or Progress Notes
 - 4. Lab results and test reports if applicable
- Lastly, it is possible under certain circumstances to request medications or supplies that are not on the VA National Formulary. Requests for non-formulary items require documentation that the formulary options have been tried and proven ineffective or are clearly contraindicated (please see enclosure for an example of the information required for a non-formulary request).

Thank you for your continued efforts to collaborate on the care of our Veterans.

Sincerely, Iowa City VA Health Care System 601 Highway 6 West Iowa City, IA 52246-2208 (319) 338-0581



<u>MEDICATIONS</u> Frequently Asked Questions (FAQ)

Question: My patient would like to get a medication filled at the VA. Can the patient do this? What do they need?

Answer: Some outside prescriptions can be filled by the VA (but must be re-written by a VA provider). It is always best to check with the patient's VA Primary Care Team about filling medications.

If the VA provider decides it is appropriate, below is a checklist that can be used to make sure the patient has everything they need to request a medication be filled through the VA:

- \Box A copy of the prescription
- \Box A copy of the paperwork stating the diagnosis related to the prescription
- □ The most recent History and Physical (H&P) and/or progress notes from most recent visit
- \Box Results of any labs or tests
- $\hfill\square$ The medication is not a short-term antibiotic prescription.
- □ Purchased the first month of the prescription at an outside pharmacy (at patient's own cost) as the process for requesting medications can take up to 30 days.

This information should be faxed to the patient's primary care provider at the VA.

Also, you can shorten the process by making sure the medication being requested is provided through the VA formulary found he<u>re: www.pbm.va.gov/NationalFormulary.asp</u>).

Question: If the patient usually orders a medication through the VA pharmacy but the next order won't be here in time can they fill the prescription outside the VA?

Answer: Definitely! Filling a prescriptions or receiving care outside of the VA will not jeopardize a patient's VA benefits in any way.



MY HEALTHeVET

Registration and IPA Information

- Many Co-Managed patients have found that the VA's My Health<u>e</u>Vet service has been beneficial in helping them manage information between their different providers.
- The information on this handout will help the patient*
 - Register for a My Health<u>e</u>Vet account
 - Obtain an upgraded account through In Person Authentication (IPA) which allows access to personal health information, including recent progress notes, medication lists, laboratory results, and clinic appointments.

*Note that this portal is for patient login only. At this time there is no mechanism by which providers can login on behalf of their patients. However, providers can access more information about My Health<u>e</u>Vet features like Blue Button at <u>www.va.gov/bluebutton</u> and information about the VA CCD (Care Coordination Document) at <u>http://www.va.gov/BLUEBUTTON/Resources.asp</u>.

<u>1) Register for a My HealtheVet account</u> - <u>Registration</u> is quick and easy. Open your internet program and in the address bar type <u>www.myhealth.va.gov</u>. Then choose the Register Today button to start the registration process.

	Search » <u>Open Advanced Search</u>
Home Veteran Services Business About VA Media Room Locations Contact Us	
Get Checked Seyger for the Lett World AIDS Day: December 1, 2010 World AIDS Day December 1, 2010 www.hkrva.gov World AIDS Day: December 1, 2010	Go to My HealtheVet Enter Here O
Prescription Refills, Healthy Living and Talking to Your Doctor Online: Veterans who are enrolled in a VA facility, registered on My Healthe Vet and complete the one-time In-Person Authentication process, can:	Register Today! Start Here 💽
 refill their VA prescriptions online by viewing their Rx medication names (not just the Rx numbers) get VA Wellness Reminders when available, participate in Secure Messaging with your health care team* all available 24/7, where ever there is Internet access. 	Why Register? How to Use My HealtheVet

• When you register, enter your First Name, Last Name, Date of Birth, Gender and Social Security Number. If you use the VA health care system, it is important that this information match your VA electronic health record information. **TIPS:** 1) Use your Veterans Identification Card (VIC) to match your information. 2) Anything with a red asterisk * needs to be completed during the registration process, for example, your address and creating a user id and password.



• If you use the VA health care system, make sure you select the "VA Patient" checkbox when you register. This is a required step before you can get an upgraded account.* You will have access to medication names in VA Prescription Refill, Wellness Reminders, and be able to use Secure Messaging when it is available in your area with an upgraded account. You may receive electronic copies of portions of your VA health information with an upgraded account.

To check your account:

- Login to My Health*e*Vet
- Select the **PERSONAL INFORMATION** tab
- Select the **Profiles** sub-tab
- Under **Relationship to the VA**, if you use the VA health care system, make sure you select the **"VA Patient"** checkbox (see red box below)
 - If "VA Patient" is not checked, and you use the VA health care system, select this box
 - This will put a checkmark in the box
- Select the **Save** button at the bottom of the screen

*Note: You have an upgraded account when you have been In-Person Authenticated.

ATIONSHIP TO THE V I us about yourself. (C	k all that apply. *At least one is required.)
VA Patient	Veteran Advocate/Family Member/Friend
Veteran	VA Employee
Health Care Provider	Other

You must indicate that you are a VA Patient before you can access VA Prescription Refill and future MHV features, such as electronic copies of your VA health information.

2) Upgraded Account (In-Person Authenticated)- My HealtheVet created a way to prove a Veteran user's identity. The process is called In-Person Authentication. When you complete this process, you have an upgraded account. My HealtheVet users who are VA patients and have an upgraded account may be able to view, print and download parts of their VA electronic health record, such as your medication list, appointments and lab results. In fact, you will be able to access all of the following personal health data (via the blue button) when you have an upgraded account:

- VA Demographics
- VA Problem List (active problems) -7 days after entry*
- VA Admissions and Discharges (including Discharge Summaries- 7 days after completion)*
- VA Notes (Progress Notes) All completed Progress Notes from January 1, 2013 forward 7 days after note completed*
- VA Laboratory Results- 7 days after test results verified*
- VA Vitals and Readings
- VA Pathology Reports: (Surgical Pathology, Cytology, Electron Microscopy) 14 days after report completed
- VA Radiology Reports 7 days after report verified
- VA Electrocardiogram (EKG) Reports (list of studies)
- VA CCD (Care Coordination Document)
 *Information on the "hold" period mentioned in several of these options can be found here:
 <u>http://vaww.va.gov/MYHEALTHEVET/docs/blue_button/VA_Blue_Button_VA_OpenNotes_Q_A.PDF</u>



Several requirements must be met before In-Person Authentication can occur:

- Be registered as a "VA Patient" in their My Health*e*Vet account
- View the My HealtheVet Orientation Video (available online or at local VA facility)
- Read and sign <u>VA Form, 10-5345a-MHV</u> (available online or at <u>local VA facility</u>)

To have your identity verified:

• Present a government issued photo identification (Veterans Identification Card (VIC) or driver's license is acceptable) to a qualified VA staff member.

IMPORTANT: Please note that any information entered in your My HealtheVet account is for you only and is not shared with your VA facility. If you need to update the information in your official VA record, including the mailing address for your VA prescriptions, please contact the appropriate office at your local VA facility.

General Information about MHV

- If you use the VA Health Care System and want to see parts of your VA electronic health record, you must complete In-Person Authentication.
- To use the Blue Button, you need a computer with a browser and Internet access. Some people have Internet access in their home. Public libraries and Internet cafés also provide Internet access. If you want to download your health information using a public computer, consider saving your information to a <u>CD</u> or <u>thumb drive</u>. You need to have access to a printer connected to the computer if you want to print your health information.
- You are the only one who sees your health information in My Health*e*Vet. You choose with whom to share your information. If you want someone else to see your health information, you must give it to that person.

You are responsible for protecting the personal health information you print out or download. *It is important to protect your information*. Protect this information the same way you would protect your banking or credit card information. Do not leave your printed information in a printer. Do not save your downloaded information to a public computer. When using a public computer, save your health information to a CD or a thumb drive. Remember to take the CD or thumb drive with you when you finish.

2 Department of Veterans Affairs	REQUEST FOR AND AUTHORIZATION TO RELEASE MEDICAL RECORDS OR HEALTH INFORMATION				
Privacy Act and Paperwork Reduction Act Information: The execution of information requested on this form is solicited under Title 38, U.S.C. The form a CFR Parts 160 and 164, 5 U.S.C. 552a, and 38 U.S.C. 5701 and 7332 that you including Social Security Number (SSN) (the SSN will be used to locate recor comply with the request. The Veterans Health Administration may not condition that you put on the form as permitted by law. VA may make a "routine use" di "Patient Medical Record - VA" and in accordance with the Notice of Privacy Pr request and serve your medical needs. Failure to furnish the information will no Number, VA will use it to administer your VA benefits. VA may also use this in purposes authorized or required by law. The Paperwork Reduction Act of 1995 section 3507 of the Paperwork Reduction Act of 1995. We may not conduct or number. We anticipate that the time expended by all individuals who must connecessary facts and fill out the form.	uthorizes specify. ds for re n treatme sclosure actices. Y t have an nformation requires sponsor	s release of information in accordan Your disclosure of the information elease) is not furnished completely ent, payment, enrollment or eligibil of the information as outlined in t You do not have to provide the infor a affect on any other benefits to w on to identify veterans and persons us to notify you that this informat r, and you are not required to respr	ce with the Health Insurance Portability and Accountability Act, 45 requested on this form is voluntary. However, if the information and accurately, Department of Veterans Affairs will be unable to ity on signing the authorization. VA may disclose the information he Privacy Act systems of records notices identified as 24VA10P2 rmation to VA, but if you don't, VA will be unable to process your hich you may be entitled. If you provide VA your Social Security claiming or receiving VA benefits and their records, and for other ion collection is in accordance with the clearance requirements of nd to, a collection of information unless it displays a valid OMB		
ENTER BELOW THE PATIENT'S NAME AND SOCIAL SECURITY NUMBER IF THE PATIENT DATA CARD IMPRINT IS NOT USED.					
TO: DEPARTMENT OF VETERANS AFFAIRS (Print or type name and address of health care facility)		PATIENT NAME (Last, First, Middle Initial)			
		SOCIAL SECURITY NUMBER			
NAME AND ADDRESS OF ORGANIZATION, INDIVIDUAL OR TITLE OF INDIVIDUAL	TO WHO	M INFORMATION IS TO BE RELEAS	GED		
VETERAN'S REQUEST: I request and authorize Department of Veterans Affairs to release the information specified below to the organization, or individual named on this request. I understand that the information to be released includes information regarding the following condition(s): DRUG ABUSE ALCOHOLISM OR ALCOHOL ABUSE TESTING FOR OR INFECTION WITH HUMAN IMMUNODEFICIENCY VIRUS (HIV) SICKLE CELL ANEMIA					
INFORMATION REQUESTED (Check applicable box(es) and					
approximate dates covered by each)					
		NOTE(S) OTHER (Spec	(צו		
PURPOSE(S) OR NEED FOR WHICH THE INFORMATION IS TO BE USED BY INDIV	IDUAL T	O WHOM INFORMATION IS TO BE F	RELEASED		
NOTE: ADDITIONAL ITEMS OF INFORMA	TION	DESIRED MAY BE LISTED	ON THE BACK OF THIS FORM		
AUTHORIZATION: I certify that this request has been made freely, voluntarily and without coercion and that the information given above is accurate and complete to the best of my knowledge. I understand that I will receive a copy of this form after I sign it. I may revoke this authorization, in writing, at any time except to the extent that action has already been taken to comply with it. Written revocation is effective upon receipt by the Release of Information Unit at the facility housing the records. Redisclosure of my medical records by those receiving the above authorized information may be accomplished without my further written authorization and may no longer be protected. Without my express revocation, the authorization will automatically expire: (1) upon satisfaction of the need for disclosure; (2) on (date supplied by patient); (3) under the following condition(s):					
I understand that the VA health care practitioner's opinions and statements are not official VA decisions regarding whether I will receive other VA benefits or, if I receive VA benefits, their amount. They may, however, be considered with other evidence when these decisions are made at a VA Regional Office that specializes in benefit decisions.					
DATE (mm/dd/yyyy) SIGNATURE OF PATIENT OR PERSON AUTHO	ORIZED "	TO SIGN FOR PATIENT (Attach auth	ority to sign, e.g., POA)		
FOR VA USE ONLY					
IMPRINT PATIENT DATA CARD (or enter Name, Address, Social Security Number)		TYPE AND EXTENT OF MATERIAL	RELEASED		
		DATE RELEASED	RELEASED BY		



RELEASE OF INFORMATION (ROI)

Question: My patient wants me to have a copy of his/her clinic notes, labs and medications. How can I get that information?

Answer: There are two ways to get your patient's medical information:

1) You can request the information using VA from 10-5345 included in this packet. The form should be submitted to the Release of Information Office at the Release of Information Office by fax or mail:

Release of Information Office Release of Information Office Iowa City VA Health Care System 601 Hwy 6 West Iowa City, IA 52246 Phone: (319) 338-0581 ext.6384 Fax: (319) 339-7189

2) You may request medical information about your patient (excluding HIV, sickle cell anemia and drug and/or alcohol abuse) to be used for treatment by faxing a request in writing on your clinic letterhead to the Release of Information Office at (319) 339-7189.

In order to get the information that would be most helpful to you, please be specific in your request. For example, latest medication list, most recent laboratory requests, or specific dates for progress notes and/or procedures.

Question: How long will it take to receive the information requested?

Answer: It is VA policy that all requests are responded to within 20 working days of receipt. (*This can be expedited in emergencies-- life-threatening situations, call the release of information office and they will fax the information immediately or if urgent but not life threatening, submit a faxed requested and ROI will usually respond within 10 minutes.)*

Question: Is there anything else I can do?

Answer: Some veterans have found the VA's online personal health record, MyHealtheVet helpful. Medications, labs and other important health information can be found on this website: <u>www.myhealth.va.gov</u>. (*Note: Some health information requires In-person authentication before the Veterans is able to access it*).



NON-FORMULARY/RESTRICTED DRUG

Typical Request Requirements

Below is a description of the typical information required for a VA provider to request a prescription medication that is non-formulary. This should be used as a guide if you have a patient who may need such a request to make sure all necessary information is gathered.

Patient Name:

Last 4 Digits of Patient's SSN:

Medication:

(Note: a separate request form is required for each medication)

Justification for Use (REQUIRED: Select the most appropriate response):

- Contraindication(s) to the formulary agent(s)
- Adverse reaction to the formulary agent(s)
- Therapeutic failure of all formulary alternatives
- No formulary alternative exists
- A serious risk is associated with a change to a formulary agent
- Other circumstances having compelling evidence-based clinical reasons

LIST ALL FORMULARY/NON-RESTRICTED AGENTS ATTEMPTED AND

OUTCOME FOR EACH (e.g. adverse drug reaction, treatment failure at maximum dose):

Additional Comments or Justification for Non-Formulary Drug:

Expected Duration of Therapy:

Please fax request form, along with prescription, to the VA medical center or clinic where the patient is seen.

Co-Managed Care Toolkit



LOCAL VA MEDICAL CENTER AND OUTPATIENT CLINICS

Information Sheet

Parent Facility: Iowa City VA Medical Center Phone: (319) 338-0581 Fax: (319) 339-7171 601 Highway 6 West Iowa City, IA 52246-2208

- *Primary Care Services*: extensive range of treatment modalities with emphasis on health care prevention
- *Specialty Care Patient Program:* includes all of the surgical specialties as well as neurology, radiation, oncology, and audiology
- *Mental Health Services:* consultation, evaluation, and treatment for a variety of issues including (but not limited to) depression, anxiety, addictive behaviors, relationship problems, post-traumatic stress disorder (PTSD), emotional problems, vocational issues, aggressive or self-harming behaviors, and sexual trauma
- *Additional services*: pharmacy, social work, women's health services, nutrition counseling, occupational therapy, physical therapy (PT), speech therapy, kinesiotherapy, home and community care and specialized services to Veterans in need of rehabilitation following amputation, stroke, traumatic brain injury, and spinal cord injury *Note: Not a designated trauma center*

VA Community Based Outpatient Clinics:

Provide primary care, preventative health, and wellness services, and most also offer mental health services including smoking cessation counseling and substance abuse counseling. Clinic locations, hours and additional available services such as PT, lab draw (lab), x-ray and EKG are listed below. In general, medications are mailed out from the Iowa City VA Medical Center pharmacy.

Bettendorf*Hours: 8-4:30(563) 332-85282979 Victoria Street; 52722*Additional Services: Lab, Xray, EKG, Pharm, PT

Decorah (563) 387-5840 915 Short Street; 52101
 Dubuque
 Hours: 9-3:00

 (563) 588-5520
 200 Mercy Drive, Suite 106; 52001

 Galesburg*
 Hours: 9-3:00

 (309) 343-0311
 387 E. Grove Street; 61401

 *Additional Services: Lab, Xray, EKG, Pharm

Ottumwa* Hours: 8-4:30 (641) 683-4300 1009 East Pennsylvania Avenue; 52501 *Additional Services: Lab, Xray, EKG, Pharm



 Quincy*
 Hours M-Th: 7-4:30

 (217) 224-3366
 Hours Fri: 8-12:00

 721 Broadway; 62301
 *Additional Services: Lab, Xray, EKG

Sterling: *Hours*: 8-4:30 (815)-632-6200 406 Avenue C; 61081

 Waterloo*
 Hours: 8-4:30

 (319) 235-1230
 945 Tower Park Drive; 50701

 *Additional Services: Lab, Xray, EKG

 Coralville
 Hours: 7:30-4:30

 Primary Care
 (Suite 100): (319) 358-2406

 Mental Health
 (Suite B): (319) 688-3366

 520 10th Avenue; 52241-1923

Vet Centers

Staffed by multidisciplinary teams of dedicated providers, many of which are combat Veterans themselves. They offer readjustment counseling services to facilitate the transition from military to civilian life. Services include individual counseling, group counseling, marital/family counseling, bereavement counseling, medical referrals, assistance in applying for VA benefits, employment counseling, alcohol/drug assessments and military sexual trauma counseling and referral.

 Cedar Rapids
 Hours: 8-4:30

 (319) 378-0016 or (319) 378-0016
 378-0016

 4250 River Center Court NE, Suite D
 Cedar Rapids, IA 52402

Quad Cities *Hours*: 8-4:30 (309)762-6955 or (877) 927-8387 1529 46th Avenue #6 Moline, IL 61265



Emergency Care in Non-VA Facilities



At some time in your life, you may need emergency care. This document explains what the VA might be able to do for you if you need emergency care. When it is not possible for you to go to a VA medical center, you should go to the nearest hospital that has an emergency room. If you are in an ambulance, the paramedics will usually take you to the closest emergency room. Here is what you should know...

What is an emergency?

A medical emergency is when you have an injury or illness that is so severe that without immediate treatment, the injury or illness threatens your health or life.

How do I know my situation is an emergency? Use your best judgment. If you believe your health or life is in danger, call 911 or go to the nearest emergency room.

If I believe my life or health is in danger, do I need to call the VA before I call for an ambulance or go into an emergency room?

No. Call 911 or go to the nearest emergency room right away.

Do I need to notify the VA after an ambulance takes me to an emergency room, or when I am treated and released?

Yes. You, your family, friends or hospital staff should contact the nearest VA medical center as soon as possible — preferably within 72 hours, so you are better aware of services the VA may limit payment for. Provide the VA with information about your emergency event and services being provided to you. Ask the VA for guidance on how they will consider reimbursing these emergency charges on your behalf, so you can plan accordingly.

If the doctor then wants to admit me to the hospital, must I obtain advance approval from the VA?

- If the admission is an emergency–NO, although prompt notification of the VA is necessary.
- If the admission is not an emergency-YES.

If a VA bed is available and I can be safely transferred, do I have to move to the VA hospital?

Yes. If you refuse to be transferred, the VA will not pay for any further care.

If I am admitted to the hospital as a result of an emergency, how much will VA pay?

This depends on your VA eligibility. The VA may pay all, some, or none of the charges . Ask your local VA medical center's patient benefits counselor about what is allowed under non-VA emergency care programs:

- For service-connected conditions
- · For non-service-connected conditions

Will I have to pay for any part of my emergency care?

It is possible. Sometimes co-pays are required based on your VA enrollment. Sometimes the extent of healthcare services reimbursable by the VA are limited by federal law.

Will VA pay for the ambulance and any possible emergency room charges if I leave the emergency room before being treated by a doctor?

Possibly not. If you leave the emergency room prior to being treated by a physician, the VA may not consider claims for that emergency event. You may be liable for some or all resulting ambulance and emergency room charges, regardless of your Veteran eligibility.

Does my enrollment in the VA Health Care System affect my eligibility for emergency care at VA expense?

Yes. Your local VA medical center's benefits counselor can explain how enrollment (or other special status categories) affect your eligibility .

If I have other insurance (TRICARE, Medicare, Medicaid, Blue Cross, etc.), will it affect whether claims for emergency services will be paid at VA expense?

Yes, it may. Your local VA medical center's benefits counselor can explain how other insurance can affect whether the VA can pay for your non-VA medical claims.

Will VA pay for emergency care if I am in jail?

No. The VA is prohibited, by federal law, from paying for the medical claims of incarcerated veterans (or fugitive felons).

How long do I have to file a claim for reimbursement for emergency medical care?

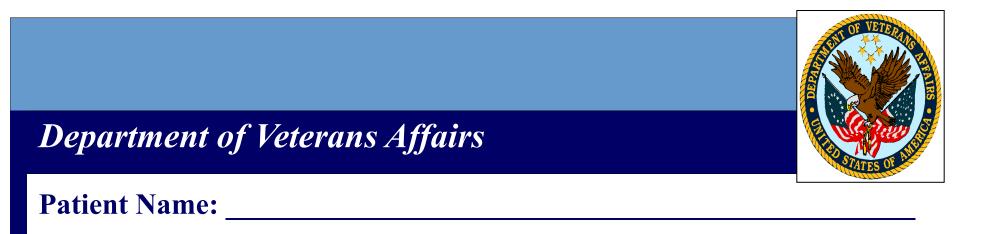
File your claim with the nearest VA medical center quickly. Time limits of 90-days usually apply. Contact your local VA medical center's patient benefits counselor for more information on the timely filing requirements for non-VA care programs.

Will VA pay for emergency care received outside the United States?

Yes in certain cases. VA will only pay for emergency care outside the US if your emergency is related to a service-connected condition. For more information, contact the VA Health Administration Center at (877) 345-8179 or consult this web site http://www4.va.gov/hac/forbeneficiaries/fmp/fmp.asp

Non-VA Emergency Care The right care... At the right time... At the right place...

Know your options ahead of time in case an emergency arises. See your VA Medical Center about your eligibility today!



Primary Care Team Information
Team Name:
Provider Name:
Point of Contact Name:
Location:
Phone:
Fax:

For Additional Co-Managed Care Resources Visit:

<u>www.ruralhealth.va.gov/resource-</u> <u>centers/central/comanagement-toolkit.asp</u>