DEPARTMENT OF VETERANS AFFAIRS

VETERANS SERVICES DIVISION POST OFFICE BOX 942895 SACRAMENTO, CALIFORNIA 94295-0001

Telephone: (916) 653-2573 Fax: (916) 653-2563



California Veteran Reintegration Program Fact Sheet Healthcare

The VA operates the nation's largest integrated healthcare system with more than 1,400 care sites including hospitals, community clinics, nursing homes, domiciliary, readjustment counseling centers, and various other facilities. There are over 100 care sites in California alone!

BASIC ELIGIBILITY

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

MINIMUM DUTY REQUIREMENTS

To be eligible, veterans who enlisted after September 7, 1980, or who 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. This minimum-duty requirement may not apply to veterans discharged for hardship, early out or a disability incurred or aggravated in the line of duty.

Certain VA benefits require service during wartime. Under these laws, the VA recognizes the following war periods:

WORLD WAR II

December 7, 1941 through December 31, 1946, inclusive. If the veteran was in service on December 31, 1946, continuous service before July 26, 1947 is considered World War II service.

KOREAN WAR

June 27, 1950 through January 31, 1955, inclusive.

VIETNAM WAR

February 28, 1961 through May 7, 1975, inclusive, in the case of a veteran who served in the Republic of Vietnam during that period. August 5, 1964 through May 7, 1975 is inclusive in all other cases.

GULF WAR

August 2, 1990 through a date to be set by law or Presidential Proclamation.

ENROLLMENT

For most veterans, entry into the VA Healthcare System begins by applying for enrollment. 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 the VA determine the number of potential veterans who may seek VA healthcare services and is a very important part of their planning efforts.

Note: Enrollment in the VA Healthcare System does not necessarily mean that a veteran has a service-connected disability.

To apply, complete VA Form 10-10EZ, Application for Health Benefits. This form can be obtained from any VA healthcare facility or regional benefits office, downloaded at www.va.gov/vaforms, or requested by calling (877) 222-VETS (8387) or contacting the County Veterans Service Office.

Once enrolled, veterans can receive treatment at a VA healthcare facility anywhere in the country. Veterans enrolled in the VA healthcare system are afforded privacy rights under federal law. The following four categories of veterans are not required to enroll, but are urged to do so to permit better planning of health resources:

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

PRIORITY GROUPS

During enrollment, each veteran is assigned to a priority group. The VA uses priority groups to balance demand for VA healthcare enrollment with available resources. Changes in availability of resources may reduce the number of priority groups the VA can enroll. If this occurs, the VA will publicize the changes and notify affected enrollees. Priority groups are defined as follows:

GROUP 1

- Veterans with VA service-connected disabilities rated 50% or more;
- Veterans assigned a total disability rating for compensation based on employability.

GROUP 2

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

GROUP 3

- Veterans who are former Prisoners of War (POW);
- Veterans awarded the Purple Heart Medal;

- Veterans awarded the Medal of Honor;
- Veterans whose discharge was for a disability incurred or aggravated in the line of duty;
- Veterans with VA service-connected disabilities rated 10% or 20%;
- Veterans awarded special eligibility classification under Title 38, USC, § 1151, "benefits for individuals disabled by treatment or vocational rehabilitation."

GROUP 4

- Veterans receiving increased compensation or pension based on their need for regular
 Aid and Attendance or by reason of being permanently housebound;
- Veterans determined by VA to be catastrophically disabled.

GROUP 5

- Veterans with a non-service connected disability and veterans with a non-compensable service-connected rating of 0%, whose annual income and/or net worth are not greater than the VA financial thresholds;
- Veterans receiving VA Pension benefits;
- Veterans eligible for Medicaid benefits.

GROUP 6

- Compensable 0% service-connected veterans;
- Veterans exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki;
- Veterans who participated in Project 112/ Shipboard Hazard and Defense Program;
- Veterans who served in the Republic of Vietnam between January 9, 1962 and May 7, 1975;
- Veterans who served in the Southwest Asia Theater of Operations between August 2, 1990 through November 11, 1998;
- Veterans who served in a theater of combat operations after November 11, 1998, as follows:
 - 1. Veterans discharged from active duty on or after January 28, 2003 for 5 years post discharge;
 - 2. Veterans who served on active duty at Camp Lejeune for not fewer than 30 days beginning Jan. 1, 1957 and ending Dec. 31, 1987.

GROUP 7

• Veterans with income and/or net worth above the VA national income threshold and income below the geographic income threshold who agree to pay copayments.

GROUP 8

- Veterans with gross household incomes:
 - 1. Above the VA Means Test thresholds who were enrolled as of January 16, 2003, and who agreed to pay the applicable copayment; or
 - Not exceeding the VA Means Test thresholds or geographic means test income thresholds by more than 10% and who agree to pay the applicable copayment effective June 15, 2009.

Note: To ensure the availability of quality and timely healthcare to veterans with service-

connected conditions, special authority based on military service, low income, and those with special healthcare needs, the VA made the difficult decision to stop enrolling new Priority Group 8 (high income) veterans whose income exceeded VA income thresholds in January 2003. The new regulations went into effect on June 15, 2009, that enabled the VA to relax income restrictions on enrollment for healthcare benefits. While this new provision does not remove consideration of income, it does increase income thresholds. Veterans may be eligible for enrollment under this new provision.

FINANCIAL ASSESSMENT

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

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

The VA also compares the veteran's financial assessment with geographically-based income thresholds. If the veteran's gross annual household income is above the VA's national means test threshold and below VA's geographic means test threshold, or is below both the VA national threshold and the VA geographically based threshold, but their gross annual household income plus net worth exceeds VA's ceiling (currently \$80,000), the veteran may be eligible for Priority Group 7 placement and qualify for an 80% reduction in inpatient copayment rates.

The income threshold table can be found at www.va.gov/healtheligibility.

RECENTLY DISCHARGED COMBAT VETERANS

Every VA Medical Center has a team ready to welcome OEF/OIF service members and help coordinate their care.

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. These veterans are not charged copayments for medications and/or treatment of conditions that are potentially related to their combat service. Veterans who enroll with the 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 copayments.

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.

For more information about the various programs available for recent returning service members, go to the Returning Service Members website at www.oefoif.va.gov/.

HOME IMPROVEMENTS AND STRUCTURAL ALTERATIONS

The VA provides up to \$6,800 lifetime benefit for service-connected veterans and up to \$2,000 for non-service-connected veterans to make home improvements necessary for the continuation of treatment or for disability access to the home and essential lavatory and sanitary facilities.

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

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

EMERGENCY MEDICAL CARE IN U.S. NON-VA FACILITIES

In the case of medical emergencies, the VA may reimburse or pay for non-VA medical care not previously authorized that is provided to certain eligible veterans when the VA or other federal facilities are not feasibly available. This benefit may be dependent upon other conditions, such as notification to the VA, the nature of treatment sought, the status of the veteran, the presence of other healthcare insurance, and third party liability.

There are different regulatory requirements that may affect VA payment and veteran liability for the cost of care; therefore, it is very important that the nearest VA medical facility that provides emergency services is notified as soon as possible after emergency treatment is sought. If emergency inpatient services are required, the VA will assist in transferring the veteran to a VA facility, if available.

ONLINE ACCESS TO VA HEALTH INFORMATION AND SERVICES

My HealtheVet offers veterans, active duty service members and their dependents, and caregivers anywhere, anytime access to VA healthcare information and services via the internet. My HealtheVet is a free, online personal health record that allows veterans to become more informed by accessing trusted and secure health and benefits information at their convenience.

With My HealtheVet, veterans can access:

- VA prescription refill services
- 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

To register, go to <u>www.myhealth.va.gov</u>, and begin making more informed decisions in collaboration with healthcare providers.

VETERANS IDENTIFICATION CARD

The VA provides eligible veterans a Veterans Identification Card (VIC) for use at VA Medical Facilities. The VIC protects the privacy of veterans' sensitive information, as it no longer displays the social security number or date of birth on the front of the card. The VIC will only display the veteran's name, picture, and special eligibility indicators such as service-connected disabled, Purple Heart, and Former POW, if applicable, on the front of the card. Only veterans who are eligible for VA medical benefits will receive the card.

For additional information on VA healthcare, go to www.va.gov/health or contact your local County Veterans Service Office for additional coverage or assistance. For locations, please visit cacvso.org or call 1-877-747-8532