



Information for Medicare Beneficiaries with Veterans Affairs (VA) Benefits

Veterans Affairs (VA) offers a health benefit package including inpatient hospital care, outpatient services, and prescription drugs. Any person who served in the military, naval, or air service (*except those with a dishonorable discharge*) is potentially eligible for VA benefits.

On August 7, 2014, President Obama signed into law the Veterans Access, Choice, and Accountability Act of 2014 (Public Law 113-146) (“VACAA”). VACAA requires VA to establish a temporary program (“Choice Program”) to improve Veterans’ access to health care by allowing eligible Veterans to use eligible health care providers outside of the VA system (non-VA care).

VA will provide a Choice Card to all Veterans who were enrolled in the VA health care system, and to recently discharged combat Veterans. Veterans who meet certain eligibility requirements will be able to elect to receive care from eligible non-VA entities and providers through the Program. VA must enter into agreements with eligible non-VA health care entities and providers for them to participate in the Program.

Eligibility

A Veteran must have been enrolled in VA health care on or before August 1, 2014, or be eligible to enroll as a recently discharged combat Veteran within 5 years of separation. Additionally, a Veteran must also meet at least one of the following criteria:

- a) The Veteran is told by his/her local VA medical facility that he/she will need to wait more than 30 days from his/her preferred date or the date medically determined by his/her physician.
- b) The Veteran’s current residence is more than 40 miles from the closest VA health care facility.
- c) The Veteran resides in a location other than Guam, American Samoa, or the Republic of the Philippines and needs to travel by plane or boat to the VA medical facility closest to his/her home.
- d) The Veteran faces a geographic challenge, such as extensive distances around water or other geologic formations, such as mountains, that presents a significant travel hardship.

Veterans who are eligible based upon their place of residence will be eligible to use the Choice Program for any services that are clinically necessary. Veterans who are eligible based on “wait-time” may select non-VA care only for an appointment for the service that cannot be scheduled within the “wait-time goals.”

To receive VA covered services, a veteran who does not meet the eligibility criteria of the Choice Program has to receive care from a VA facility. If an eligible Veteran has another health-care plan, VA will be secondarily responsible for costs associated with non-service connected care and services furnished to eligible Veterans through the Choice Program and primarily responsible for service connected care. Only when a veteran has a Choice Card and meets the eligibility criteria will the VA cover care provided in a non-VA facility. Many veterans choose to enroll in Medicare for additional coverage and options.

Medicare and VA Benefits

<p>Medicare Part A (Hospital) and B (Medical):</p>	<p>VA benefits are not considered creditable coverage for Parts A and B. VA enrollees don’t have to enroll in Medicare, but if a beneficiary opts to enroll at a later date, he/she must wait until the general enrollment period (January 1 – March 31) to enroll and coverage will start on July 1. A Part B penalty will apply if a beneficiary does not have creditable coverage. The VA recommends that beneficiaries elect Medicare Part A and B because the VA does not pay for services at non-VA facilities unless eligibility criteria for the Choice Program is met.</p>
<p>Medicare Supplement Plans (Medigap):</p>	<p>If the individual receives care outside the VA system and doesn’t meet the Choice Program criteria for eligibility, enrolling in Medicare A and B with a supplement plan is an option to pay for these costs. The VA is required to bill private health insurance for medical care, supplies and prescriptions provided for treatment of veteran’s non service-connected conditions. <i>Generally, VA cannot bill Medicare, but it can bill Medicare supplemental health insurance for covered services.</i></p>
<p>Medicare Part D (Prescription Drug):</p>	<p>Prescription drug coverage offered through the VA is creditable coverage for Medicare Part D. Veterans do not need to enroll in a Part D plan. However, veterans may enroll in a Part D plan and continue using their coverage through VA. If a veteran chooses to enroll in a Part D plan at a later date, he/she does not have to pay a penalty. He/She will be required to wait for the Annual Enrollment Period or meet the criteria for a Special Enrollment Period to enroll in a plan.</p>