Health Care Benefits

VA operates the nation's largest integrated health care system with more than 1,500 sites of care, including hospitals, community clinics, community living centers, domiciliaries, readjustment counseling centers, and various other facilities. For additional information on VA health care, visit: www.va.gov/health.

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 health care benefits. Reservists and National Guard members may also qualify for VA health care 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: Veterans who enlisted after Sept. 7, 1980, or who entered active duty after Oct. 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 discharged for hardship, early out or a disability incurred or aggravated in the line of duty.

Enrollment

For most Veterans, entry into the VA health care system begins by applying for enrollment. Veterans can now apply and submit their application for enrollment (VA Form 1010EZ), online at www.1010ez. med.va.gov/sec/vha/1010ez/. If assistance is needed while completing the on-line enrollment form, an online chat representative is available to answer questions Monday - Friday between 8 a.m. and 8 pm EST. Veterans can also enroll by calling 1-877-222-VETS (8387) Monday through Friday, 8 a.m. to 8 p.m. Eastern time, or at any VA health care facility or VA regional benefits office. Once enrolled, Veterans can receive health care at VA health care facilities anywhere in the country.

Veterans enrolled in the VA health care system are afforded privacy rights under federal law. VA's Notice of Privacy Practices, which de-

scribes how VA may use and disclose Veterans' medical information, is also available on line at www.va.gov/vhapublications/viewpublication.asp?pub_ID=1089

The following four categories of Veterans are not required to enroll, but are urged to do so to permit better planning of health resources:

- 1. Veterans with a service-connected disability of 50 percent or more.
- 2. 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.
- 3. Veterans seeking care for a service-connected disability only.
- 4. Veterans seeking registry examinations (Ionizing Radiation,

Agent Orange, Gulf War/Operation Iraqi Freedom/Operation New Dawn and Depleted Uranium).

Priority Groups

During enrollment, each Veteran is assigned to a priority group. VA uses priority groups to balance demand for VA health care enrollment with resources. Changes in available resources may reduce the number of priority groups VA can enroll. If this occurs, VA will publicize the changes and notify affected enrollees. A description of priority groups follows:

Group 1: Veterans with service-connected disabilities rated 50 percent or more and/or Veterans determined by VA to be unemployable due to service-connected conditions.

Group 2: Veterans with service-connected disabilities rated 30 or 40 percent.

Group 3:

Veterans who are former POWs.

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 percent or

20 percent.

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

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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:

Nonservice-connected Veterans and noncompensable serviceconnected Veterans rated 0 percent, 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 percent 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 the Republic of Vietnam between Jan. 9, 1962 and May 7, 1975.

Veterans who served in the Southwest Asia theater of operations from Aug. 2, 1990, through Nov. 11, 1998.

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

Veterans discharged from active duty on or after Jan. 28, 2003, for five years post discharge;

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 incomes below the geographic means test income thresholds and who agree to pay the applicable copayment.

Group 8:

Veterans with gross household incomes above the VA national income threshold and the geographically-adjusted income threshold for their resident location and who agrees to pay copayments. Veterans eligible for enrollment: Noncompensable 0-percent service-connected and:

Subpriority a: Enrolled as of Jan. 16, 2003, and who have re-

mained 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 percent or less

Veterans eligible for enrollment: Nonservice-connected and

Subpriority c: Enrolled as of Jan. 16, 2003, and who 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 percent or less

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

Subpriority e: Noncompensable 0 percent service-connected Subpriority f: Nonservice-connected

VA's current income thresholds can be located at: http://www.va.gov/ healthbenefits/cost/income_thresholds.asp

Recently Discharged Combat Veterans

Veterans, including activated reservists and members of the National Guard, are eligible for the enhanced Combat Veteran benefits if they served on active duty in a theater of combat operations after Nov. 11, 1998, and have been discharged under other than dishonorable conditions.

Effective Jan. 28, 2008, combat Veterans discharged from active duty on or after Jan. 28, 2003, are eligible for enhanced enrollment placement into Priority Group 6 (unless eligible for higher enrollment Priority Group placement) for five-years post discharge.

Veterans receive VA care and medication at no cost for any condition that may be related to their combat service.

Veterans who enroll with VA under this Combat Veteran authority will remain enrolled even after their five-year post discharge period

ends. At the end of their post discharge period, VA will reassess the Veteran's information (including all applicable eligibility factors) and make a new enrollment decision. For additional information, call 1-877-222-VETS (8387), Monday through Friday between 8:00 a.m. and 8:00 p.m. Eastern time.

Special Access to Care

Service-Disabled Veterans: who are 50 percent or more disabled from service-connected conditions, unemployable due to service-connected conditions, or receiving care for a service-connected disability receive priority in scheduling of hospital or outpatient medical appointments.

Women Veterans

Women Veterans are eligible for the same VA benefits as male Veterans. Comprehensive health services are available to women Veterans including primary care, specialty care, mental health care, residential treatment and reproductive health care services

VA provides management of acute and chronic illnesses, preventive care, contraceptive and gynecology services, menopause management, and cancer screenings, including pap smears and mammograms. Maternity care is covered in the Medical Benefits package. Women Veterans can receive maternity care from an OB/GYN, family practitioner, or certified nurse midwife who provides pregnancy care.

VA covers the costs of care for newborn children of women Veterans for seven days after birth. Infertility evaluation and limited treatments are also available. Women Veterans Program Managers are available at all VA facilities to assist women Veterans in their health care and benefits. For more information, visit http://www.womenshealth. va.gov/.

Military Sexual Trauma

Military sexual trauma (MST) is the term that the Department of Veterans Affairs uses to refer to sexual assault or repeated, threatening sexual harassment that occurred while the Veteran was serving on active duty (or active duty for training if the service was in the National Guard or Reserves). VA health care professionals provide counseling and treatment to help Veterans overcome health issues related to MST. Veterans who are not otherwise eligible for VA health care may still receive these services. Appropriate services are provided for any injury, illness or psychological condition related to such trauma. For additional information visit: http://www.mentalhealth.va.gov/msthome.asp

Veterans with Spinal Cord Injury/Disorders

There are 24 VA medical centers in the United States with specialized centers (called Spinal Cord Injury Centers) for Veterans with spinal cord injuries and disorders (SCI/D). Comprehensive rehabilitation, SCI/D specialty care, medical, surgical, primary, preventive, psychological, respite, and home care are provided at these centers by interdisciplinary teams which include physicians, nurses, therapists (physical, occupational, kinesiotherapists, therapeutic recreation), psychologists, social workers, vocational counselors, dieticians, respiratory therapy, and other specialists as needed.

There are five Spinal Cord Injury (SCI) Centers that provide long term care for Veterans with SCI/D. In VA facilities that do not have SCI Centers, there is a designated team that consists of a physician, nurse, and social worker to address primary care needs for Veterans with SCI/D and to make referrals to SCI Centers. These SCI Centers and the teams in facilities that do not have centers, comprise the VA SCI System of Care. Some of the services provided in this system of care include rehabilitation, prosthetics and durable medical equipment, orthotics, sensory aids, assistive technology, environmental modifications, telehealth, ventilator weaning and care, chronic pain management, mental health treatment, drivers training, peer counseling, substance abuse treatment, vocational counseling, and caregiver training and support.

There is a long-standing Memorandum of Agreement between VA and the Department of Defense (DoD) to provide specialized care at VA medical facilities for Active Duty Servicemembers who have sustained a spinal cord injury. Ongoing collaboration and education between VA and DoD ensures continuity of care and services. For more information about SCI/D care and the eligibility requirements for the above benefits and services, contact your local VA SCI/D Center and/or visit http://www.sci.va.gov.

OEF/OIF/OND Care Management

Each VA medical center has an OEF/OIF/OND Care Management team in place to coordinate patient care activities and ensure that

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Servicemembers and Veterans are receiving patient-centered, integrated care and benefits. OEF/OIF/OND clinical case managers screen all returning combat Veterans for the need for case management services to identify Veterans who may be at risk so VA can intervene early and provide assistance. Severely ill or injured Servicemembers/Veterans are provided with a case manager and other OEF/OIF/OND Servicemembers/Veterans are assigned a case manager as indicated by a positive screening assessment or upon request. OEF/OIF/OND case managers are experts at identifying and accessing resources within their health care system as well as in the local community to help Veterans recover from their injuries and readjust to civilian life.

Financial Assessment

Most Veterans not receiving VA disability compensation or pension payments must provide a financial assessment to determine whether they are below VA income thresholds. VA is currently not enrolling new applicants who decline to provide financial information unless they have a special eligibility factor exempting them from disclosure. VA's income thresholds are located at: www.va.gov/healtheligibility/ Library/AnnualThresholds.asp

The 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 primary residence, stocks, bonds, notes, individual retirement accounts, bank deposits, savings accounts and cash.

Medical Services and Medication Copayments

Some Veterans are required to make copayments (copays) to receive VA health care and/or medications.

Inpatient Care: Priority Group 7 and certain other Veterans are responsible for paying 20 percent of VA's inpatient copay or \$236.80 for the first 90 days of inpatient hospital care during any 365-day period. For each additional 90 days, the charge is \$118.40. In addition, there is a \$2 per diem charge.

Priority Group 8 and certain other Veterans are responsible for VA's

inpatient copay of \$1,184 for the first 90 days of care during any 365-day period. For each additional 90 days, the charge is \$592. In addition, there is a \$10 per diem charge.

Extended Care: Veterans may be subject to a copay for extended care services. The copay is determined by a calculation using information from completion of VA Form 10-10EC, Application for Extended Care Services.

VA social workers or case managers will counsel Veterans or their family representatives on their eligibility and copay requirements. The copay amount is based on the Veteran's financial situation determined upon application for extended care services and can range from \$0 to a maximum copayment amount of \$97 a day.

NOTE: Veterans determined to be catastrophically disabled are exempt from copays applicable to the receipt of noninstitutional respite care, noninstitutional geriatric evaluation, noninstitutional adult day health care, homemaker/home health aide, purchase skilled home care, home-based primary care, hospice services and any other noninstitutional alternative extended care services.

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

Primary Care Services: \$15 Specialty Care Services: \$50

NOTE: Copay amount is limited to a single charge per visit regardless of the number of health care providers seen in a single day. The copay amount is based on the highest level of service received.

Outpatient Visits Not Requiring Copays: Certain services are not charged a copay. Copays do not apply to publicly announced VA health fairs or outpatient visits solely for preventive screening and/ or vaccinations, such as vaccinations for influenza and pneumococ-

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cal, or screening for hypertension, hepatitis B, tobacco, alcohol, hyperlipidemia, breast cancer, cervical cancer, Human papillomavirus (HPV), colorectal cancer by fecal occult blood testing, education about the risks and benefits of prostate cancer screening, HIV testing and prevention counseling (including the distribution of condoms), and weight reduction or smoking cessation counseling (individual and group). Laboratory, plaim film radiology, electrocardiograms, and hospice care and in-home video telehealth are also exempt from copays. While hepatitis C screening and HIV testing and counseling are exempt, medical care for HIV and hepatitis C are NOT exempt from copays.

Medication: While many Veterans are exempt for medication copays, nonservice-connected Veterans in Priority Groups 7 and 8 are charged \$9 for each 30-day or less supply of medication provided on an outpatient basis for the treatment of a nonservice-connected condition. Veterans enrolled in Priority Groups 2 through 6 are charged \$8 for each 30-day or less supply of medication; the maximum copay for medications that will be charged in calendar year 2013 is \$960 for nonservice-connected medications.

NOTE: Copays apply to prescription and over-the-counter medications, such as aspirin, cough syrup or vitamins, dispensed by a VA pharmacy. Copays are not charged for medical supplies, such as syringes or alcohol wipes. Copays do not apply to condoms.

Health Savings Accounts (HSA) can be utilized to make VA copayments. HSAs are usually linked to High Deductible Health Plans (HDHPs).

Private Health Insurance Billing

VA is required to bill private health insurance providers for medical care, supplies and medications provided for treatment of Veterans' non-service connected conditions. Generally, VA cannot bill Medicare, but can bill Medicare supplemental health insurance for covered services. VA is authorized to bill and accept reimbursement from High Deductible Health Plans (HDHPs) for care provided for non-service connected conditions.VA may also accept reimbursement from Health Reimbursement Arrangements (HRAs) for care provided for non-service connected conditions.

All Veterans applying for VA medical care are required to provide

information on their health insurance coverage, including coverage provided under policies of their spouses. Veterans are not responsible for paying any remaining balance of VA's insurance claim not paid or covered by their health insurance, and any payment received by VA may be used to offset "dollar for dollar" a Veteran's VA copayment responsibility.

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All Veterans applying for VA medical care are required to provide information on their health insurance coverage, including coverage provided under policies of their spouses. Veterans are not responsible for paying any remaining balance of VA's insurance claim not paid or covered by their health insurance, and any payment received by VA may be used to offset "dollar for dollar" a Veteran's VA copay responsibility.

Release of Information (ROI) for Sensitive Diagnosis

An ROI authorization form VAF 10-5345 is a VA standard form used to obtain authorization to release sensitive (protected) health information to an insurance company for purposes of reimbursement.. Veterans/patients who were treated or offered treatment for a sensitive condition of drug abuse, alcohol abuse or alcoholism, HIV testing or treatment, and Sickle Cell Anemia or Trait must provide written authorization to allow VA to release their sensitive information to a third party (insurance company).

NOTE: Please note that if the ROI authorization form is not completed and signed, the VA cannot bill the insurance company for non-service connected care. Thus if the Veteran is required to pay a copayment for health visits, the Veteran will be responsible for the entire copayment amount as VA will not be able to credit account dollar for dollar based on what the insurance company has reimbursed.

Reimbursement of Travel Costs

Eligible Veterans may be provided mileage reimbursement or, when medically indicated, special mode transport (e.g. wheelchair van, ambulance) when traveling for approved VA medical care.

Mileage reimbursement is 41.5 cents per mile and is subject to a deductible of \$3 for each one-way trip and \$6 for a round trip; with a maximum deductible of \$18 or the amount after six one-way trips (whichever occurs first) per calendar month.

The deductible may be waived when travel is in relation to a VA compensation or pension examination; travel is by special mode; or when imposition would cause a severe financial hardship.

Eligibility: The following are eligible for VA travel reimbursement:

Veterans rated 30 percent or more service-connected . Veterans traveling for treatment of service-connected conditions.

Veterans who receive a VA pension.

Veterans traveling for scheduled compensation or pension examinations.

Veterans whose income does not exceed the maximum annual VA pension rate.

Veterans in certain emergency situations.

Veterans whose medical condition requires a special mode of transportation and travel is pre-authorized. (Advanced authorization is not required in an emergency and a delay would be hazardous to life or health).

Certain non-Veterans when related to care of a Veteran (Caregivers, attendants & donors).

Beneficiary travel fraud can take money out of the pockets of deserving Veterans. Inappropriate uses of beneficiary travel benefits include: incorrect addresses provided resulting in increased mileage; driving/riding together and making separate claims; and taking no cost transportation, such as DAV, and making claims. Veterans making false statements for beneficiary travel reimbursement may be prosecuted under applicable laws.

Reporting Fraud: Help VA's Secretary ensure integrity by reporting suspected fraud, waste or abuse in VA programs or operations.

VA Inspector General Hotline

P.O. Box 50410 Washington, DC 20091-0410 E-mail: vaoighotline@va.gov VAOIG hotline 1-800-488-8244 Fax: (202) 565-7936

VA Medical Programs

Veteran Health Registries

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Certain Veterans can participate in a VA health registry and receive free evaluations. These evaluations include a medical history, physical exam, and if deemed necessary by the clinician, laboratory tests or other studies. VA maintains health registries to provide special health evaluations and health-related information. To participate, contact the Environmental Health Coordinator at the nearest VA health care facility or visit www.publichealth.va.gov/exposures to see a directory which lists Environmental Health Coordinators by state and U.S. territory.

Veterans should be aware that a health registry evaluation is not a disability compensation exam. A registry evaluation does not start a claim for compensation and is not required for any VA benefits.

Gulf War Registry: For Veterans who served on active military duty in Southwest Asia during the Gulf War, which began in 1990 and continues to the present, and includes Operation Iraqi Freedom (OIF) and Operation New Dawn (OND). The Gulf War registry was designed to identify possible health effects resulting from U.S. military personnel service in certain areas of Southwest Asia. Potential exposures include endemic infectious diseases and hazardous occupational or environmental exposures, including heavy metals, air pollutants (particulate matter and gases such as nitrogen oxides, carbon monoxide sulfur oxides, hydrocarbons).

Depleted Uranium Registries: Depleted uranium (DU) is uranium left over after most of the more radioactive U-235 isotope has been removed. DU possesses about 60 percent of the radioactivity of naturally occurring uranium; it is a radiation hazard only in very large exposures for prolonged time. DU has some chemical toxicity related to being a heavy metal (similar to lead) which occurs at lower doses and is the main concern for Veterans with embedded DU fragments.

Veterans who are identified by the Department of Defense (DoD) or have concerns about possible depleted uranium exposure are eligible for a DU evaluation at their local facility.

Agent Orange Registry: Agent Orange is an herbicide the U.S. military used between 1962 and 1971 during the Vietnam War to remove jungle that provided enemy cover. Veterans serving in Vietnam

were possibly exposed to Agent Orange or its dioxin contaminant. Veterans eligible for this registry evaluation are those who served on the ground in Vietnam between Jan. 9,1962, and May 7,1975, regardless of the length of service; this includes Veterans who served aboard boats that operated on inland waterways ("Brown Water Navy") or who made brief visits ashore.

Other Veterans with possible exposure who are eligible include those who served: along the demilitarized zone in Korea (between April 1, 1968 and Aug. 31, 1971), on certain bases or in certain units in Thailand (between Feb. 28, 1961 and May 7, 1975), or on certain U.S. bases or locations in other countries where Agent Orange or other herbicides were tested or stored.

VA maintains a DoD-provided list of locations and dates where Agent Orange or other herbicides were tested or stored at military bases in the U.S. or locations in other countries at www.publichealth.va.gov/ exposures. For sites not listed, the Veteran should provide some proof of exposure to obtain a registry examination. Information is also available through VA's Special Issues Helpline at 1-800-749-8387.

Ionizing Radiation Registry: For Veterans in receipt of nasopharyngeal (nose and throat) radium irradiation treatments while in the active military, naval, or air service and Veterans possibly exposed to, and who are concerned about, possible adverse effects of their atomic exposure during the following "radiation-risk activities" –

On-site participation in:

an atmospheric detonation of a nuclear device, whether or not the testing nation was the United States;

occupation of Hiroshima or Nagasaki from Aug. 6, 1945, through July 1, 1946; or

internment as a POW in Japan during World War II, which the Secretary of Veterans Affairs determines resulted in an opportunity for exposure to ionizing radiation comparable to that of Veterans involved in the occupation of Hiroshima or Nagasaki, or

Service at (VA regulations provide that "radiation-risk activity" refers to):

Department of Energy gaseous diffusion plants at Paducah, Kentucky, Portsmouth, Ohio, or the K-25 area at Oak Ridge, Tennessee, for at least 250 days before Feb. 1, 1992, if the Veteran was monitored for each of the 250 days using dosimetry badges to monitor radiation to external body parts; or

Amchitka Island, Alaska, before Jan. 1, 1974, if the Veteran served for at least 250 days in a position that had exposures comparable to a job that was monitored using dosimetry badges in proximity to Longshot, Milrow, or Cannikin underground nuclear tests.

Readjustment Counseling Services

VA provides outreach and readjustment counseling services through 300 community-based Vet Centers located in all 50 states, the District of Columbia, Guam, Puerto Rico, and America Samoa.

Eligibility: Veterans are eligible if they served on active duty in a combat theater or area of hostility during World War II, the Korean War, the Vietnam War, the Gulf War, or the campaigns in Lebanon, Grenada, Panama, Somalia, Bosnia, Kosovo, Afghanistan, Iraq and the Global War on Terror. Veterans, who served in the active military during the Vietnam-era, but not in the Republic of Vietnam, must have requested services at a Vet Center before Jan. 1, 2004. Vet Centers do not require enrollment in the VHA Health Care System.

Services Offered: Vet Center counselors provide individual, group, and family readjustment counseling to combat Veterans to assist them in making a successful transition from military to civilian life; to include treatment for post-traumatic stress disorder (PTSD) and help with any other military related problems that affect functioning within the family, work, school or other areas of everyday life. Other psycho-social services include outreach, education, medical referral, homeless Veteran services, employment, VA benefit referral, and the brokering of non-VA services. The Vet Centers also provide military sexual trauma counseling to Veterans of both genders and of any era of military service.

Bereavement Counseling related to Servicemembers: Bereavement counseling is available through VA's Vet Centers to all immediate family members (including spouses, children, parents, and siblings) of Servicemembers who die while serving on active service. This includes federally-activated members of the National Guard and reserve components. Vet Center bereavement services for surviving family members of Servicemembers may be accessed by calling (202) 461-6530.Vet Center Combat Call Center (1-877-WAR-VETS)

is an around the clock confidential call center where combat Veterans and their families can call to talk about their military experience or any other issue they are facing in their readjustment to civilian life. The staff is comprised of combat Veterans from several eras as well as family members of combat Veterans. For additional information, contact the nearest Vet Center, listed in the back of this book, or visit www.vetcenter.va.gov/.

Vet Center Combat Call Center: (1-877-WAR-VETS) is an around the clock confidential call center where combat Veterans and their families can call to talk about their military experience or any other issue they are facing in their readjustment to civilian life. The staff is comprised of combat Veterans from several eras as well as family members of combat Veterans.

Prosthetic and Sensory Aids

Veterans receiving VA care for any condition may receive VA prosthetic appliances, equipment and services, such as home respiratory therapy, artificial limbs, orthopedic braces and therapeutic shoes, wheelchairs, powered mobility, crutches, canes, walkers, special aids, appliances, optical and electronic devices for visual impairment and other durable medical equipment and supplies. Veterans who are approved for a guide or service dog may also receive service dog benefits including veterinary care and equipment.

VA medical services include diagnostic audiology and diagnostic and preventive eye care services. VA will provide hearing aids and eyeglasses to the following Veterans:

(a) Those with any compensable service-connected disability.

(b) Those who are former Prisoners of War (POWs).

(c) Those who were awarded a Purple Heart.

(d) Those in receipt of benefits under Title 38 United States Code (U.S.C.) 1151.

(e) Those in receipt of an increased pension based on being rated permanently housebound or in need of regular aid and attendance.

(f) Those with vision or hearing impairment resulting from diseases or the existence of another medical condition for which the Veteran is receiving care or services from VHA, or which resulted from treatment of that medical condition, e.g., stroke, polytrauma, traumatic brain injury, diabetes, multiple sclerosis, vascular disease, geriatric chronic illnesses, toxicity from drugs, ocular photosensitivity from drugs, cataract surgery, and/or other surgeries performed on the eye, ear, or brain resulting in vision or hearing impairment.

(g) Those with significant functional or cognitive impairment evidenced by deficiencies in the ability to perform activities of daily living. but not including normally occurring visual or hearing impairments. Note: Veterans with normally occurring visual and/or hearing impairments that interfere with their medical care are eligible for eyeglasses and hearing aids.

(h) Those who have vision or hearing impairment or combined visual and hearing impairments severe enough that it interferes with their ability to participate actively in their own medical treatment. **Note:** The term "severe" is to be interpreted as a vision and/or hearing loss that interferes with or restricts access to, involvement in, or active participation in health care services (e.g., communication or reading medication labels). The term is not to be interpreted to mean that a severe hearing or vision loss must exist to be eligible for hearing aids or eyeglasses.

(i) Those Veterans who have service-connected which contribute to a loss of communication ability; however, hearing aids are to be provided only as needed for the service-connected hearing disability.

Nonservice-connected (NSC) Veterans are eligible for hearing aids or eyeglasses on the basis of medical need. All such Veterans (including Medal of Honor recipients who do not have entitling conditions or circumstances and catastrophically disabled Veterans) must receive a hearing evaluation by a state-licensed audiologist prior to determining eligibility for hearing aids or an appropriate evaluation by an optometrist or ophthalmologist prior to determining eligibility for eyeglasses to establish medical justification for provision of these devices. These Veterans must meet the following criteria for eligibility based on medical need:

(a) Be enrolled at the VA medical facility where they receive their health care; and

(b) Have hearing or vision loss that interferes with or restricts communication to the extent that it affects their active participation in the provision of health care services as determined by an audiologist or an eye care practitioner or provider.

For additional information, contact the prosthetic chief or representative at the nearest VA medical center or go to www.prosthetics. va.gov.

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Home Improvements and Structural Alterations

VA provides up to \$6,800 lifetime benefits for service-connected Veterans/Servicemembers and up to \$2,000 lifetime benefit for or nonservice-connected Veterans to make home improvements and/or structural changes necessary for the continuation of treatment or for disability access to the Veterans/Servicemembers home and essential lavatory and sanitary facilities.

Modifications can include but are not limited to:

Ramps allowing entrance to, or exit from, the Veterans/Servicemembers primary residence; Widening of doorways to allow access to essential lavatory and sanitary facilities; Raising or lowering kitchen or bathroom sinks and/or counters; Improving entrance paths or driveways in immediate area of the home to facilitate access to the home by the Veteran/Servicemember; Improving plumbing or electrical systems made necessary due to installation of dialysis equipment or other medically sustaining equipment in the home. For application information, contact the Prosthetic Representative at the nearest VA medical center.

Special Eligibility Programs

Special Eligibility for Children with Spina Bifida: VA provides comprehensive health care benefits, including outpatient, inpatient, pharmacy, prosthetics, medical equipment, and supplies for certain Korea and Vietnam Veterans' birth children diagnosed with Spina Bifida (except spina bifida occulta).

Special Eligibility for Veterans Participating in Vocational Rehabilitation: Veterans participating in VA's vocational rehabilitation program may receive VA health care benefits including prosthetics, medical equipment, and supplies.

Limitations on Benefits Available to Veterans outside the U.S.:

Veterans outside the U.S. are eligible for prosthetics, medical equipment, and supplies only for a service-connected disability.

Services for Blind and Visually Impaired Veterans

Severely disabled blind Veterans may be eligible for case management services at a VA medical center and for admission to an inpatient or outpatient VA blind or vision rehabilitation program. In addition, blind Veterans enrolled in the VA health care system may receive:

- 1. A total health and benefits review as well as counseling on obtaining benefits that may be due to the Veteran but have not been received.
- 2. Adjustment to blindness training and counseling.
- 3. Home improvements and structural alterations.
- 4. Specially adapted housing and adaptations.
- 5. Automobile grant.
- 6. Rehabilitation assessment and training to improve independence and quality of life.
- 7. Low-vision devices and training in their use.
- 8. Electronic and mechanical aids for the blind, including adaptive computers and computer-assisted devices such as reading machines and electronic travel aids.
- 9. Facilitation and recommendation for guide dogs and support in the use of guide dogs.
- 10. Costs for veterinary care and equipment for guide dogs.
- 11. Talking books, tapes and Braille literature.
- 12. Family education and support.

Eligible visually impaired Veterans (who are not severely visually disabled) enrolled in the VA health care system may be eligible for services at a VA medical center or for admission to an outpatient VA blind rehabilitation program and may also receive:

- 1. A total health and benefits review.
- 2. Adjustment to vision loss counseling.
- 3. Rehabilitation assessment and training to improve independence and quality of life.
- 4. Low-vision devices and training in their use.
- 5. Electronic and mechanical aids for the visually impaired, including adaptive computers and computer-assisted devices, such as reading machines and electronic travel aids, and training in their use.
- 6. Family education and support.

Mental Health Care Treatment

Veterans eligible for VA medical care may receive general and specialty mental health treatment as needed. Mental health services are available in primary care clinics (including Home Based Primary Care), general and specialty mental health outpatient clinics, inpatient mental health units, residential rehabilitation and treatment programs, specialty medical clinics, and Community Living Centers. Mental Health services are also available in medical settings in which

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patients are receiving treatment, such as inpatient medicine and outpatient specialty medical clinics. In addition to general mental health care, this may include specialized PTSD services, treatment for Veterans with psychological conditions related to a history of military sexual trauma, psychosocial rehabilitation and recovery services, treatment for substance use disorders, suicide prevention programs, geriatric mental health problems, violence prevention, evidencebased psychotherapy programs, treatment with psychiatric medications consistent with VA Clinical Practice Guidelines , integrated care services, and mental health disaster response/post deployment activities.

Specialized programs, such as mental health intensive case management, psychosocial rehabilitation and recovery centers, and work programs are provided for Veterans with serious mental health problems. VA's Program of Comprehensive Assistance for Family Caregivers entitles the designated primary and secondary Family Caregiver(s) access to mental health. These services may be offered at the VA and/or contracted agencies. General Caregivers (of all era Veterans) can receive counseling and other services when necessary if the treatment supports the Veteran's treatment plan. For more information on VA Mental Health services visit http://www. mentalhealth.va.gov/VAMentalHealthGroup.asp

Veterans Crisis Line:Veterans experiencing an emotional distress/ crisis or who need to talk to a trained mental health professional may call the Veterans Crisis Line 1-800-273-TALK (8255). The hotline is available 24 hours a day, seven days a week. When callers press "1", they are immediately connected with a qualified and caring provider who can help.

Chat feature: Veterans Chat is located at the Veterans Crisis Line and enables Veterans, their families and friends to go online where they can anonymously chat with a trained VA counselor. Veterans Chat can be accessed through the suicide prevention Website www. Veterancrisisline.net by clicking on the Veterans Chat tab on the right side of the Webpage.

Text feature: Those in crisis may text 83-8255 free of charge to receive confidential, personal and immediate support.

European access: Veterans and members of the military community in Europe may now receive free, confidential support from the European Military Crisis Line, a new initiative recently launched by VA. Callers in Europe may dial 0800-1273-8255 or DSN 118 to receive confidential support from responders at the Veterans Crisis Line in the U.S. For more information about VA's suicide prevention program, visit: http://www.mentalhealth.va.gov/suicide_prevention/ or www.veteranscrisisline.net.

Make the Connection Resources: help Veterans and their family members connect with information and services to improve their lives. Visitors to MakeTheConnection.net will find a one-stop resource where Veterans and their family and friends can privately explore information, watch stories similar to their own, research content on mental health issues and treatment, and easily access support and information that will help them live more fulfilling lives.

At the heart of Make the Connection are powerful personal testimonials, which illustrate true stories of Veterans who faced life events, experiences, physical injuries or psychological symptoms; reached out for support; and found ways to overcome their challenges. Veterans and their families are encouraged to "make the connection" - with strength and resilience of Veterans like themselves, with other people who care, and with information and available resources for getting their lives on a better track. For more information, go to www. MakeTheConnection.net

Coaching Into Care: works with family members or friends who become aware of the Veteran's post-deployment difficulties, and supports their efFt.s to find help for the Veteran. This national clinical service provides information and help to Veterans and the loved ones who are concerned about them. More information about the service can be found at http://www.mirecc.va.gov/coaching/contact.asp

VA's National Center for PTSD serves as a resource for healthcare professionals, Veterans and families. Information, self-help resources, and other helpful information can be found at www.ptsd.va.gov.

The PTSD Coach is a mobile application that provides information about PTSD, self assessment and symptom management tools and provides information about to connect with resources that are available for those who might be dealing with post trauma effects. The PTSD Coach is available as a free download for iPhone or Android devices.