

# Veterans Health and Financial Benefits Overview

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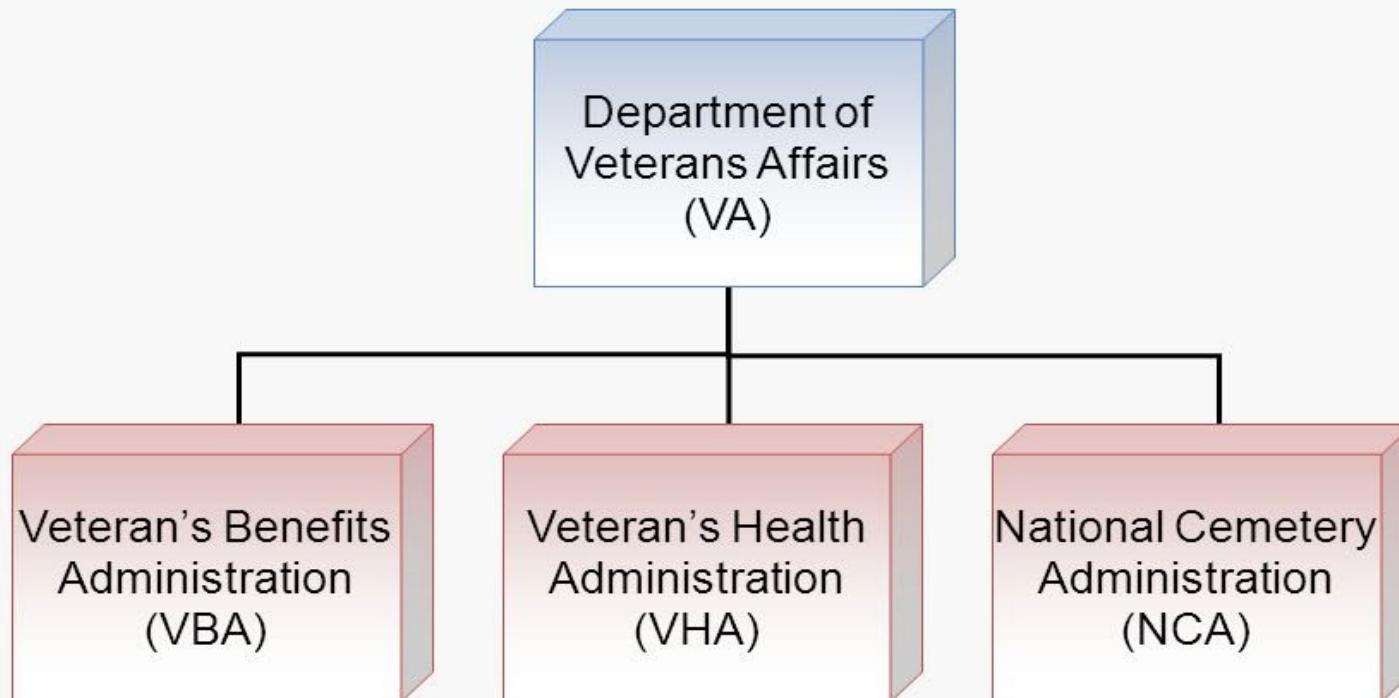
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Senior Social Worker

VA Maryland Healthcare System



# VA Organization



Courtesy of Kevin Meldrum

# VA Maryland Healthcare System

## Medical Centers

Baltimore

Perry Point

Loch Raven

## Community Based Outpatient Clinics (CBOC)

Glen Burnie

Fort Howard

Fort Meade

Cambridge

Pocomoke

# Applying for Services

## **New Enrollment**

Completed Application for Health Benefits  
(10-10EZ)

DD214 or equivalent

## **Former VA Care – Not in Maryland**

Completed Health Benefits Renewal Form  
(10-10EZR)

Contact Enrollment with Full Name, Full SSN, DOB

## **Former VAMHCS (out of care for 1 year)**

Completed Health Benefits Renewal Form  
(10-10EZR)

Must see a Primary Care Provider before additional services can be ordered

Eligibility and Enrollment contact: 410-642-2411 ext 5032

# Military Discharge Papers DD214, DD215, Certificates

Necessary to determine eligibility

Remind all Veterans to maintain  
a copy for themselves

VHA does NOT always have copies

VA Form SF180

[www.Archive.gov](http://www.Archive.gov)

THIS IS AN IMPORTANT RECORD SAFEGUARD IT.											
1. LAST NAME - FIRST NAME - MIDDLE NAME			2. SEX	3. SOCIAL SECURITY NUMBER			4. DATE OF BIRTH	YEAR	MONTH	DAY	
██			M	██			40	03	03		
5. DEPARTMENT, COMMANDER AND BRANCH OR CLASS			6. GRADE, RATE OR RANK	7. PAY GRADE	8. PAY RATE	9. DATE OF PARK	YEAR	MONTH	DAY		
ARMY-RA			SFC	E7	██	69	03	06			
10. SELECTIVE SERVICE NUMBER			11. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE			12. HOME OR RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RPD, City, State and ZIP Code)					
NA			NA			Bel Air, MD 21014					
13. TYPE OF SEPARATION			14. STATION OR INSTALLATION AT WHICH EFFECTED			15. RE-ENLISTMENT CODE					
Retirement			Aberdeen Proving Ground, MD 21005			79 04 30					
16. AUTHORITY AND REASON			17. TYPE OF CERTIFICATE ISSUED			18. DATE ENTERED ACTIVE DUTY THIS PERIOD					
HONORABLE			DD Form 363A			77 08 18					
19. LAST DUTY ASSIGNMENT AND MAJOR COMMAND			20. COMMAND TO WHICH TRANSFERRED USAR CON GP (RETIRED)			21. DATE ENTERED ACTIVE DUTY THIS PERIOD					
68th ADA, Ft Hood, TX FORSCOM FC			RC PAC 9700 Page Blvd, St Louis, MO 63132			77 08 18					
22. TERMINAL DATE OF RESERVE CONTRACT YEAR MONTH DAY			23. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code)			24. DATE ENTERED ACTIVE DUTY THIS PERIOD					
NA			Wuerzburg, Germany			77 08 18					
25. PRIMARY SPECIALTY NUMBER AND TITLE			26. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER			27. RECORD OF SERVICE					
16R40 760402 ADA ShortRegGtryCmn None			None			YEARS MONTHS DAYS					
28. NO NET ACTIVE SERVICE THIS PERIOD			29. IN PRIOR ACTIVE SERVICE			30. TOTAL ACTIVE SERVICE (A + B)					
30. IN PRIOR ACTIVE SERVICE			31. IN PRIOR INACTIVE SERVICE			32. TOTAL INACTIVE SERVICE					
32. TOTAL SERVICE FOR MAY (A + B)			33. FOREIGN AND/OR SEA SERVICE THIS PERIOD			34. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (IN MONTHS)					
34. YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> RVN 10 Mar 71 to 5 Feb 72			35. SECONDARY/MINH SCHOOL 12 yrs (1-12 grade) COLLEGE 00 yrs			36. PERSONNEL SECURITY INVESTIGATION					
36. TIME LOST (Pending T-1 to T-2)			37. DAYS ACCRUED LEAVE PAID			38. SERVICE MEMBERS GROUP LIFE INSURANCE COVERAGE			39. DATE COMPLETED		
None			None			<input type="checkbox"/> \$1,000 <input type="checkbox"/> \$5,000 <input checked="" type="checkbox"/> \$20,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE			NAC 13 Dec 67		
40. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED			41. DISABILITY SEVERANCE PAY			42. PERSONNEL SECURITY INVESTIGATION			43. DATE COMPLETED		
National Defense Service Medal; Vietnam Service Medal; Republic of Vietnam Campaign Medal; Vietnamese Cross of Gallantry W/Palm; Armed Forces Expeditionary Medal (Korea); Army Commendation Medal W/1st OLC; Good Conduct Medal (1st-5th Awards)			44. NO <input type="checkbox"/> YES			45. TYPE			46. DATE COMPLETED		
47. REMARKS											
Last Overseas Service: Germany (25 Apr 76-20 Apr 78)											
Individual requests a copy of DD Form 214 and Optional Form <u>      </u>											
48. MAILING ADDRESS AFTER SEPARATION (Street, RPD, City, County, State and ZIP Code)			49. SIGNATURE OF PERSON BEING SEPARATED								
██			██								
Aberdeen (Harford) MD 21001			A. KOSINSKI, DAC, Asst Adjutant								
50. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER			51. SIGNATURE OF OFFICER AND DATES OF SERVICE								
A. KOSINSKI, DAC, Asst Adjutant			A. Kosinski, DAC, Asst Adjutant								
52. PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.											
53. THIS IS AN IMPORTANT RECORD SAFEGUARD IT.											
54. REPORT OF SEPARATION FROM ACTIVE DUTY											

# Eligibility for Healthcare

**Honorable/General**

**Under Honorable**

90days ACTIVE DUTY PRIOR  
to 1980

2 Years ACTIVE DUTY

Or

Completion of Full Active  
Tour

**Other than  
Honorable**

Not eligible for most  
VA services

Can be see for  
Mental Health  
emergencies

NOT Eligible if National Guard or Reserves  
activated for TRAINING purposes only

# Priority Groups

## **Priority Group 1**

Service Connected 50% or more

## **Priority Group 2**

Service Connected 30%-40%

## **Priority Group 3**

POWs

Purple Heart

Service Connected 10%-20%

## **Priority Group 4**

Aid and Attendance

Catastrophically disabled (determined by VA)

## **Priority Group 5**

Receive a Non-Service Connected Pension

Income below VA's geographically adjusted income limit

Medicaid eligible

# Priority Groups

## Priority Group 6

- \* Service Connected 0% (Compensable)
- \* Served in Vietnam between January 9, 1962 and May 7, 1975
- \* Served in the Persian Gulf War between August 2, 1990 and November 11, 1998
- \* Active Duty at Camp Lejeune for at least 30 days between August 1, 1953 and December 31, 1987
- \* Served in theater of combat operations after November 11, 1998 and were discharged from active duty on or after January 28, 2003 (5 years post discharge only)

# Priority Groups

## Priority Group 7

Gross household income below the geographically adjusted VA income limit and who agree to pay copays

## Priority Group 8

Veterans with gross household income above the VA income limited and the geographically adjusted income limits and who agree to pay copays

Continuously enrolled since January 16, 2003

New enrollment after June 15, 2009 and income exceeds the limit by less than 10%

# Priority Groups

Veterans enrolling after 2009 who are 0% Service Connected/Non-Service Connected and their income exceeds the limit by more than 10% are

**NOT ELIGIBLE FOR VA HEALTHCARE**

# Healthcare Services Available

## **Outpatient**

Primary Care

Mental Health\*

Specialty Clinics

Telehealth

Dental\*

ED/Urgent Care

Pharmacy

## **Inpatient**

Acute Medicine

Surgery

ICU/MICU

Mental Health/Residential

Long Term Care\*

Hospice

# Medication and Supplies

**All Medication and Supplies received through the VA MUST  
be ordered by a VA Provider**

## **Durable Medical Equipment and Home Oxygen**

Can be ordered by the Veterans VA Provider with  
NO copayment to the veteran

Discuss availability and processing time with the  
veterans Primary Care Team

Perry Point Primary Care contact: 410-642-2411 ext 1300

# Long Term Care Services (Inpatient)

## **Acute and Subacute Rehabilitation, Skilled Nursing, Nursing Home Care**

Must be 70% -100% Service Connected

Require assistance with at least 2 ADLs for LTC

## **Inpatient Hospice Care**

6 month or less prognosis, DNAR in place

Veteran and family agree to hospice philosophy

ALL Veterans eligible for VA healthcare are eligible for hospice care

All referrals should be sent to Kelly Grande, LCSW-C 410-642-2411  
ext 6353

# Community Care Services

Home Health Aide – up to 10 hours per week

Adult Day Health Care – 2 days/week

Veteran Directed Care

Home Based Primary Care

Skilled Home Care

Referrals must be made by the Veterans Primary Care Team

Homecare is subject to \$15/visit copayment

Waitlists for all of the programs at this time

# Cost of Care

**Priority Group 1** – No cost for care

**Priority Groups 2-3** - No cost for care directly related to their service connected conditions

**Priority Groups 4-7** –some or all copayments may apply, based on their income

**Priority Group 8** – all copayments apply

# Cost of Care

## **Outpatient copayments:**

Primary Care: \$15/visit

Specialty Care: \$50/visit

## **Inpatient copayments:** Medicare rate

## **Outpatient Medications:**

Priority Groups 2-8

Tier 1 (generics) \$5/month

Tier 2 (non preferred generics/OTC) \$8/month

Tier 3 (brand name) \$11/month

# Non-VA Care

## CHOICE Program

NOT a health insurance

Veterans must be referred by their VA provider to access care outside of the VA through CHOICE

Does NOT cover Emergency Department, Long term care

## Non-VA Care - For medical emergencies

Potential for VA payment if the veteran

Is actively receiving care within the VAMHCS

Is receiving emergency care and is admitted for a service connected condition

Has no other insurance

Is sent by the VA for care

Claim is received within 90 days

Questions can be directed to Non-VA Care: 410-642-2411 ext 6980

# VA and Other Insurance

**Veteran can have other insurance and receive care at the VA**

Enrollment in VA qualifies as insurance coverage under the Affordable Care Act

VA cannot bill Medicare however will bill private insurance

VA encourages veterans to maintain other insurance coverage in case of emergencies not covered by the VA

# Information Sharing

Please obtain a Release of Information for all Veterans who receive care within the VA.

Following admission we will need:

History & Physical

Discharge Summary

Discharge Medication

Recommendations for home care

Release of Information contact: 410-642-2411 ext 6028

# VA Health Care

Questions????

# Veterans Benefits Administration

## Types of Benefits:

Service Connection (SC)

Non-Service Connected Pension (NSC Pension)

Aid and Attendance (A&A)

# Service Connection

An Illness or Injury Caused by or Aggravated by ACTIVE Duty Service

Must have a separation or discharge from service that is Other than  
DISHONORABLE\*

Disability Assigned a 0% to 100% Rating

Monthly monetary compensation varies with the severity/ degree of  
disability and the number of eligible dependents (spouse, children,  
other dependents)

Can be service connected for multiple conditions and ratings will be  
combined

# Presumptive Illnesses

Presumptive means VA assumes that certain diseases can be related to a Veteran's qualifying military service.

WWII- POWS

Korean War- Cold Injuries (Frostbite)

Vietnam- Agent Orange Exposure (AOX)

Gulf War (Southwest Asia Theater)

Desert Storm- GI

GWOT- unexplained chronic illness

Camp Lejeune- USMC Only

All Veterans - ALS

# Non-Service Connected Pension

A needs-based benefit paid to Veterans who meet age or non-service connected disability requirements.

## **Criteria:**

Honorable discharge AND  
90 days or more of active duty with at least 1 day during a period of war time\* AND  
You meet the net worth limitations, AND  
You are age 65 or older, OR, you have a permanent and total non-service connected disability, OR, you are patient in a nursing home, OR you are receiving Social Security disability benefits

# Official War Time Eras:

WWII (1939-1945)

KOREAN (1950-1953)

VIETNAM (1965-May 1975)

PERSIAN GULF (1990- ??)

DESERT STORM/SHIELD

OIF/OEF

OND

# Aid and Attendance

**Additional financial benefit that can be used to pay for  
ALF or NH care**

Veteran who is in need of the regular assistance of another person

Veteran who is permanently housebound

Veteran who is 30 percent or more disabled can receive an additional payment for a spouse who is in need.

# Dependent Benefits

## CHAMPVA

Insurance available to the spouse of 100% Service Connected Veterans who are in need  
Secondary to Medicare

**Spouses, children, surviving spouses are NOT eligible for VA Health Care. Limited financial benefits may be available through VBA.**

# Case A

Vernon is a 78 year old veteran, 70% Service Connected for PTSD. Medical history includes Type II Diabetes. He has been admitted to your facility for a CVA. He is currently on day 3 of his admission. He has been evaluated by PT/OT/Speech who are recommending low level rehab however feel his rehab potential may be limited and he will likely require 24 hour care. His family is agreeable to a trial of rehab but ultimately would like for him to return home. He will require equipment and additional support at home for this to be a safe option. He has Medicare A&B and BC/BS. He is followed by a Primary Care Provider at the Perry Point VA and was seen one week prior to his admission.

# Case B

Eric is a 45 year old OEF veteran admitted to your facility after a motorcycle accident where he fractured his femur which required surgery to repair. Medical history is significant for hearing loss, chronic shoulder pain, asthma, Bipolar disorder and alcohol abuse. He has never accessed the VA for healthcare and does not have insurance. He lives on the Eastern Shore. He was discharged from your facility one week ago with recommendations of outpatient PT/OT and has missed half of his therapy sessions. He reports that he is having difficulty getting to his follow-up appointments due to transportation.

# Additional Resources

[www.va.gov](http://www.va.gov)

VBA: 1-844-MyVA311

VHA: 1-877-222-VETS

Crisis Line: 1-800-273-TALK

Thank you for sharing your afternoon  
with us!

**Questions???**